



THE

HEALTH OF ROTHERHAM

1956

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH

AND

ANNUAL REPORT OF THE PRINCIPAL SCHOOL MEDICAL OFFICER



COUNTY BOROUGH OF ROTHERHAM

REPORT

BY THE
MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1956

ROTHERHAM :
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1957

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HEALTH COMMITTEE

NATIONAL HEALTH SERVICE ACTS, 1946-1952

The Health Committee of the Council is concerned with all matters of public health and the operation of all services under the above Acts.

MEMBERSHIP

(as at 31st December, 1956)

HIS WORSHIP THE MAYOR (COUNCILLOR F. DAVIES)

Chairman: ALDERMAN A. BUXTON, J.P.

Vice-Chairman: COUNCILLOR A. WILDE

ALDERMAN MRS. F. L. GREEN, J.P.	COUNCILLOR J. FORD
ALDERMAN MRS. M. H. MOORHOUSE, J.P.	COUNCILLOR R. HAGUE
ALDERMAN F. C. WOFINDEN	COUNCILLOR MRS. E. McNICHOLAS
COUNCILLOR W. BEEVERS	COUNCILLOR J. E. MICKLETHWAIT
COUNCILLOR E. A. DAVIS	COUNCILLOR H. PAYNE
COUNCILLOR C. DUFFIELD	COUNCILLOR P. C. WRIGHT

GENERAL PURPOSES SUB-COMMITTEE

ALDERMAN A. BUXTON, J.P. (Chairman)	ALDERMAN MRS. M. H. MOORHOUSE, J.P.
COUNCILLOR A. WILDE (Vice-Chairman)	ALDERMAN F. C. WOFINDEN
HIS WORSHIP THE MAYOR (COUNCILLOR F. DAVIES)	COUNCILLOR W. BEEVERS
ALDERMAN MRS. F. L. GREEN, J.P.	COUNCILLOR C. DUFFIELD
	COUNCILLOR H. PAYNE

MENTAL HEALTH SUB-COMMITTEE

ALDERMAN A. BUXTON, J.P. (Chairman)	COUNCILLOR C. DUFFIELD
COUNCILLOR A. WILDE (Vice-Chairman)	COUNCILLOR J. FORD
HIS WORSHIP THE MAYOR (COUNCILLOR F. DAVIES)	COUNCILLOR MRS. E. McNICHOLAS
ALDERMAN MRS. F. L. GREEN, J.P.	COUNCILLOR J. E. MICKLETHWAIT
	COUNCILLOR P. C. WRIGHT

SANITARY SUB-COMMITTEE

ALDERMAN A. BUXTON, J.P. (Chairman)	COUNCILLOR W. BEEVERS
COUNCILLOR A. WILDE (Vice-Chairman)	COUNCILLOR C. DUFFIELD
HIS WORSHIP THE MAYOR (COUNCILLOR F. DAVIES)	COUNCILLOR J. FORD
ALDERMAN F. C. WOFINDEN	COUNCILLOR H. PAYNE
	COUNCILLOR P. C. WRIGHT

NURSING SUB-COMMITTEE

ALDERMAN A. BUXTON, J.P. (Chairman)	Non-corporate members: —
COUNCILLOR A. WILDE (Vice-Chairman)	Mr. H. DUCKER
HIS WORSHIP THE MAYOR	Mr. F. IRELAND
(COUNCILLOR F. DAVIES)	Mr. W. A. MILES
ALDERMAN MRS. M. H. MOORHOUSE, J.P.	Miss E. M. RUSHFORTH
COUNCILLOR E. A. DAVIS	Mrs. K. SIDES
COUNCILLOR J. FORD	Miss E. A. TIMMS
COUNCILLOR MRS. E. McNICHOLAS	
COUNCILLOR J. E. MICKLETHWAIT	
COUNCILLOR P. C. WRIGHT	

DOMICILIARY SERVICES SUB-COMMITTEE

ALDERMAN A. BUXTON, J.P. (Chairman)	COUNCILLOR W. BEEVERS
COUNCILLOR A. WILDE (Vice-Chairman)	COUNCILLOR J. FORD
HIS WORSHIP THE MAYOR	COUNCILLOR R. HAGUE
(COUNCILLOR F. DAVIES)	COUNCILLOR MRS. E. McNICHOLAS
ALDERMAN MRS. M. H. MOORHOUSE, J.P.	COUNCILLOR J. E. MICKLETHWAIT

REPRESENTATIVES ON THE AMBULANCE JOINT SUB-COMMITTEE

ALDERMAN A. BUXTON, J.P.	COUNCILLOR C. DUFFIELD
	COUNCILLOR A. WILDE

REPRESENTATIVES ON THE CARE OF THE AGED JOINT SUB-COMMITTEE

ALDERMAN A. BUXTON, J.P.	COUNCILLOR MRS. E. McNICHOLAS
	COUNCILLOR A. WILDE

STAFF

(as at 31st December, 1956)

MEDICAL OFFICER OF HEALTH AND PRINCIPAL SCHOOL MEDICAL OFFICER:

R. J. Donaldson, M.B., Ch.B., D.P.H.

DEPUTY MEDICAL OFFICER OF HEALTH AND DEPUTY PRINCIPAL SCHOOL MEDICAL OFFICER:

W. J. Connelly, L.R.C.P., L.R.C.S.,
L.R.F.P.S., D.P.H.

ASSISTANT MEDICAL OFFICERS OF HEALTH AND SCHOOL MEDICAL OFFICERS:

Mary D. A. Boyd, M.B., Ch.B.

Evelyn Bostock, M.B., B.S.,
D.Obst. R.C.O.G.

T. M. B. Rohan, M.B., B.Ch., B.A.O.

PRINCIPAL DENTAL OFFICER:

H. R. Heald, L.D.S.

DENTAL OFFICERS:

Joan H. Egan, B.D.S.

G. W. Lowe, L.D.S.

J. Leeson, B.D.S. (part time)

L. F. T. Liang, L.D.S. (part time)

H. P. Redfearn, L.D.S. (part time)

EDUCATIONAL PSYCHOLOGIST:

Vacant—appointment made.

CHIROPODIST (part time):

L. Aldam, M.Ch.S.

CONSULTING STAFF (part time):

OPHTHALMOLOGY:

T. Stafford Maw, M.B., Ch.B.,
D.O.M.S.

Franziska Fischer, M.D.

EAR, NOSE AND THROAT:

H. M. Petty, M.B., Ch.B., D.L.O.

PSYCHIATRY:

J. D. Orme, L.R.C.P., M.R.C.S., D.P.M.

OBSTETRICS AND GYNAECOLOGY:

D. Ballantine, M.B., Ch.B., F.R.C.S.,
M.R.C.O.G., L.M.

TUBERCULOSIS:

A. C. Morrison, M.D., D.P.H.

ORTHODONTICS:

J. H. Gardiner, B.D.S., L.D.S. (Manch.)

ORTHOPAEDICS:

H. L. McMullen, B.A., M.B., B.Chir.,
F.R.C.S.

PUBLIC ANALYST (part time):

H. Childs, B.Sc., F.R.I.C.

LAY ADMINISTRATIVE OFFICER:

G. E. Westby (1), (5)

SENIOR CLERK:

G. H. Biggin

MEDICAL OFFICER OF HEALTH'S

SECRETARY:

Miss J. Caseldine

GENERAL OFFICE: CLERICAL STAFF:

5 Clerks

CHIEF PUBLIC HEALTH INSPECTOR:

L. Eastwood, M.A.P.H.I., A.M.Inst.P.C.,
(1), (2), (3), (4), (5)

DEPUTY CHIEF PUBLIC HEALTH INSPECTOR:

T. E. Snape, M.A.P.H.I., (1), (2), (3).

PUBLIC HEALTH INSPECTORS :

G. C. Harrison, M.A.P.H.I., (1)
W. James, (1)
L. W. Lodge, M.A.P.H.I. (1), (2)
S. R. Sneddon, M.R.S.A.S. (1), (2)
M. A. Standish, (1), (5)
1 vacancy

PUBLIC HEALTH INSPECTOR'S SECTION :

1 Pupil Public Health Inspector
2 Clerks
2 Disinfectors
1 Ratcatcher

SUPERINTENDENT HEALTH VISITOR:

Miss E. G. Taylor (6), S.R.N., S.C.M.

**DEPUTY SUPERINTENDENT HEALTH
VISITOR:**

Miss C. M. Wilkinson (6), S.R.N.,
S.C.M.

HEALTH VISITOR/SOCIAL WORKER:

Miss M. J. Casey (6), S.R.N., S.C.M.

HEALTH VISITOR/SCHOOL NURSES:

Miss M. Fleming, S.R.N., S.R.F.N.,
S.C.M.
Miss N. B. Griffiths (6), S.R.N., S.C.M.
Miss E. M. Jeffs (6), S.R.N., S.C.M.
Miss E. Keeton (6), S.R.N., S.C.M.
Mrs. R. McHugh (6), S.R.N., S.C.M.
Miss M. Myers, S.R.N., S.C.M.
Miss A. W. Ritchie (6), S.R.N., S.C.M.
Miss T. Shanley (6), S.R.N., S.C.M.

Miss M. Willis, S.R.N., S.C.M.

Miss N. Y. Wilson (6), S.R.N., S.C.M.
5 vacancies

SCHOOL NURSES:

Mrs. E. M. Catley, S.R.N.
Miss C. J. Crofton, S.R.N., S.C.M.
Miss G. K. Cave, S.R.N., S.C.M.
Mrs. N. Lloyd, S.R.N.
Mrs. E. Ward, S.R.N.

CLINIC NURSES:

Mrs. E. A. S. Hoyle, S.R.N., S.C.M.
Mrs. M. Mossman, R.S.C.N.
Mrs. M. P. Phinn, S.R.N., S.C.M.
Mrs. R. Jackson, S.R.N., S.C.M.
(part time).

CLINIC ASSISTANTS:

Miss E. M. Nicklin
Mrs. M. Glover.

PHYSIOTHERAPIST:

Vacant—appointment made

SPEECH THERAPIST:

Miss A. D. Lee, L.C.S.T.

MATERNITY AND CHILD WELFARE SECTION:

SENIOR CLERK:

Miss N. H. Platts
6 Clerks

SCHOOL HEALTH SECTION:

SENIOR CLERK:

Miss W. M. Cooper
5 Clerks
1 Dental Clerk.
4 Dental Attendants
1 Dental Mechanic

HOME NURSING SERVICE:

SUPERINTENDENT:

Miss V. M. McCarthy (6), S.R.N.,
S.C.M.

SENIOR DISTRICT NURSE:

Miss M. Walker, S.R.N.

18 nurses (full time)

9 nurses (part time)

HOME HELP SERVICE:

HOME HELP ORGANISER AND SOCIAL
WORKER FOR THE AGED:

Mrs. R. E. Wales

DEPUTY HOME HELP ORGANISER:

Mrs. G. Stevenson

164 home helps (part time)

3 visitors (full time)

2 visitors (part time)

SENIOR CLERK:

Miss W. Gill

1 clerk

DISTRICT MIDWIVES SERVICE:

SUPERINTENDENT MIDWIFE AND NON-
MEDICAL SUPERVISOR OF MIDWIVES:

Mrs. M. J. Walsh, S.R.N., S.C.M.

DEPUTY SUPERINTENDENT MIDWIFE:

Mrs. I. McGann, S.R.N., S.C.M.

DISTRICT MIDWIVES:

Miss E. Atkinson, S.R.N., S.C.M.

Mrs. H. M. Clarke, S.R.N., S.C.M.

Mrs. M. Copley, S.R.N., S.C.M.

Mrs. W. A. G. Herrington, S.R.N.,
S.C.M.

Mrs. E. Houghton, S.C.M.

Miss E. D. Jeyes, S.C.M.

Miss K. Ray, S.R.N., S.C.M.

Miss S. M. Thorpe, S.R.N., S.C.M.

Mrs. G. Walsh, S.R.N., S.C.M.

RELIEF MIDWIVES:

Mrs. B. Ellis, S.C.M.

Mrs. E. Hawley, S.C.M.

Mrs. M. Hughes, S.C.M.

1 vacancy

MENTAL HEALTH OFFICER:

W. R. Sidaway

ASSISTANT MENTAL HEALTH OFFICER:

H. Coates

1 Mental Health Trainee—vacancy

OCCUPATION CENTRE AND

INDUSTRIAL CENTRE:

HEAD TEACHER:

Miss E. Kelford

DEPUTY HEAD TEACHER:

Miss G. Calam

OCCUPATION CENTRE

3 Assistant teachers (female)

INDUSTRIAL CENTRE:

2 Assistant teachers (male)

1 Assistant teacher (female)

HEALTH SERVICES BUREAU:

2 Clerks

WELFARE FOODS SHOP:

1 Sales clerk

2 Sales assistants

QUALIFICATIONS:

- (1) Certificate, Public Health Inspector
- (2) Certificate, Meat and Other Foods Inspector
- (3) Certificate, Smoke Inspector
- (4) Testamur, Institute of Public Cleansing (Honours)
- (5) Building Construction Certificate
- (6) Certificate, Royal Sanitary Institute (Health Visitor)
- (7) Housekeeping Certificate

Health Department,
Municipal Offices,
ROTHERHAM.

To the Chairman and Members of the Health Committee
of the County Borough of Rotherham

I have pleasure in submitting the report on the health of Rotherham for 1956.

The estimated mid-year population of the County Borough was 82,850. The birth rate per thousand for the year was 17.22 as compared with 16.02 in 1955 and the death rate was 12.70 per 1,000 as compared with 11.00 in 1955. An interesting feature was that just over one-third of the persons who died were over the age of 75 years, slightly under one-third were between 65 and 75 years and the remaining third were under 65 years of age. Thirty-four deaths occurred under one year of age in the County Borough during the year. This was equal to an infantile mortality rate of 23.9 as compared with the provisional rate of 23.7 for England and Wales. Sixteen of the thirty-three infant deaths registered during the year were premature.

On 31st March, 1956, Rotherham withdrew from the Sheffield, Rotherham and District Smoke Abatement Committee and the statutory powers concerning atmospheric pollution were transferred to the Sanitary Sub-Committee. The Chief Public Health Inspector and his staff set about the task of carrying out a survey of the industries in the area and of establishing personal contact with managers. In order to encourage district public health inspectors to obtain the appropriate qualification, the Health Committee resolved to pay an additional £50 per annum to those inspectors who were in possession of the smoke certificate. A standard deposit gauge was installed at the Industrial Centre, Kimberworth Road, as it was felt that this would give an idea of the atmospheric pollution in an area which was partly industrial and partly residential.

There was a very marked increase in the number of cases of dysentery and food poisoning notified and the number of notifications is the highest ever recorded. It must be remembered that the method of ascertainment has also been considerably improved. In other words, it is probable that in the past there has been this number of cases occurring, but many of them were not notified. These diseases are spread in the main by lack of care with personal hygiene.

No cases of diphtheria were notified during the year, the last case occurring in March, 1952. The year also was free from cases of poliomyelitis.

The figures for diphtheria immunisation show an increase of 232 primary immunisations compared with 1955. This is partly due to the fact that during 1956 the mobile ambulance visited children at home. Concentration of effort has been directed to the immunisation of children before their first birthday and of 1,320 children immunised during the year, 760 were under one year old—57.6 per cent. Of this 760, 536 were born in 1955 and 224 were born in 1956. As these latter children must be eight months old before immunisation, this is equal to 50 per cent. of the children born in the first four months of the year. In comparison with 1955, when 149 of the children born that year were immunised, the 1956 figure is equal to a 50 per cent. increase. There is still room for considerable improvement but apathy exists

amongst parents, many of whom have never seen a case of diphtheria. I am quite satisfied that the health visiting staff, during the year, have exercised to the full their persuasive powers to get parents to bring their children for immunisation.

Poliomyelitis Vaccination was introduced during the year and 277 children were vaccinated out of a total of 2,895 registered.

The domiciliary midwifery services available in Rotherham are reviewed in this report and some interesting trends are noted, particularly since the introduction of the National Health Service Act, 1946. The domiciliary confinements were 51.45 per cent. of the total.

The work of the health visitor throughout the year was somewhat handicapped due to the shortage of staff. The lack of clinic accommodation also became rather acute, the main problem being the shift in population to the new housing estates.

The Home Nursing Service, to some extent, suffered during the year from shortage of staff, particularly with regard to male nurses, and in the latter months of the year was left with only one male nurse who had to carry out duties in all parts of the town. The total number of visits during the year showed an increase of 4,575, though there was a decrease of 385 in the number of cases nursed.

The Home Help Service again showed quite a marked expansion, particularly in respect of the care of the old people. The excellent liaison with the hospital service continued during the year. This ensures that there is continuity in the care of old people. The Domiciliary Meals Service which was commenced in September, 1955, is now firmly established in spite of some earlier financial difficulties, and the work of the Old People's Welfare Committee in supplying the necessary funds is something that can be highly commended. The Home Help Service is, of course, still relatively new and its possibilities have not yet been explored. It is fair to say that in Rotherham the service is carried out on a very wide variety of functions, which is more than was originally thought of when it was introduced. The effectiveness of our domiciliary service for old people can be best judged by the low number of old people awaiting hospital admission from the County Borough during the year.

The attitude to the mentally ill person has changed considerably during the past few years as shown in the alteration to the ratio of the "certified patient" to the "voluntary patient" admitted to hospital. Only 13 were admitted as "certified" and 97 as "voluntary" patients, whereas during 1955 the figures were 53 and 41 respectively. The work done with the mentally backward children and adults continued throughout the year, and the range of activities was extended at both the Occupation and Industrial Centres. The garden at Ferham Villa has now been laid out by the pupils.

A branch of the Family Planning Association was formed in Rotherham in February, 1956. The work of this Association is well-known and scientific spacing of families is being widely practised in order that a happy family unit can be achieved. The need for the service in Rotherham has been clearly demonstrated by the way in which the Clinic flourished in its first few months. Facilities were made available at Ferham House Clinic and the Health Committee granted financial assistance to the Association.

The Health Committee decided to close the Health Services Bureau on the 31st March, 1957, after considering the nature of the work being undertaken.

This year marked the fourth attendance of the Mass Radiography Unit's annual visit to Rotherham, which performs a very useful function in detecting early cases of tuberculosis. The slight decrease in the total attendances, 7,671 as compared with 8,178 in 1955, is probably due to the fact that the Unit visited a large steel works in the town just prior to the public sessions.

A number of visitors came to Rotherham during the year, and amongst those who visited the department was the Minister of Health, the Rt. Hon. R. H. Turton, M.C., M.P., to inspect the various aspects of our services. The number of visitors from various authorities during the year is an indication of the high regard in the Country as a whole with which the health services are held.

During the year there were three main additions to the work of the Medical and Nursing staff—B.C.G. Vaccination, medical examination of bus drivers and Polio-myelitis Vaccination. These tasks were undertaken due to the co-operation of the staff concerned without any additional help.

Fifty years have elapsed since the appointment in 1907 of the first full-time Medical Officer of Health, Dr. Alfred Robinson, in this County Borough, although the first Annual Report from a part-time Medical Officer is for the year 1874. For this reason a photograph of Dr. Robinson appears in the report, together with a picture of a chart on Infantile Mortality, which shows the changes in the death rate of children under one year of age since the beginning of the century.

The retirement of Mr. T. W. Pearce, Deputy Chief Sanitary Inspector, breaks one of the few remaining links with the past. He commenced as a youth in the department in 1908 and with the exception of five years army service in the First World War, he gave continued and devoted service to this authority.

Congratulations are due to Mrs. R. E. Wales, Home Help Organiser, who was appointed Vice-President of the National Institute of Home Help Organisers, and Mr. G. E. Westby, who was appointed as Chairman of the Yorkshire District Committee of the National and Local Government Officers Association.

I am grateful to the hospital and general practitioner services for their help in maintaining the high standard of liaison which has existed. Other Corporation departments' co-operation with the Health Department has been outstanding, and this has helped considerably in the smooth running of the Local Authority Health Services. I deeply appreciate the excellent support and complete loyalty of all sections of the department whose splendid work throughout the year has made the writing of this report possible. Finally, may I take this opportunity of expressing my thanks to the Chairman, Vice-Chairman and members of the Health Committee for their help both in and out of Committee, which has proved for me a most valuable asset in running the department.

My report as Principal School Medical Officer follows the report on the Health Services.

R. J. DONALDSON,

Medical Officer of Health.

STATISTICS OF THE AREA

GENERAL STATISTICS

Area (in acres)	..	..	..	..	..	..	..	..	..	9,255
Population (census) 1951	..	..	..	..	..	..	..	..	..	82,334
Population (estimated civilian) 1956			..	..	..	..	..	..	..	82,850
Number of inhabited houses (1/4/1957)	..	..	..	..	..	..	..	..	..	25,702
Rateable value (1/4/1957)	..	..	..	..	..	..	..	..	..	£890,000
Sum represented by a penny rate (1/4/1957)	..	..	..	..	..	..	..	..	..	£3,550

VITAL STATISTICS

In the following summary extracts from the vital statistics for the year are given :

			Total	Male	Female					
Live Births										
Legitimate	..		1386	702	684	—	Birth rate per 1,000 population	..	..	17.22
Illegitimate	..		41	24	17	—	Adjusted birth rate per 1,000 population			
							(comparability figure 0.98)	..	..	16.87
Stillbirths	..	..	31	17	14	—	Rate per 1,000 (live and still) births	..		21.26
Deaths	..	..	877	493	384	—	Crude death rate per 1,000 population			10.58
							Adjusted death rate per 1,000 population			
							(comparability figure — 1.20)	..		12.70

										Rate per 1,000
										total (live and
Death from puerperal causes :								Deaths		still) births
Puerperal sepsis	..	..	..	..	..	..	..	—		—
Other puerperal causes	..	..	..	..	..	..	..	4		2.74
								—		—
							Total	4		2.74
								—		—

Death rate of infants under one year of age :

All infants per 1,000 live births	..	..	..	..	..	..	..	..	..	24
Legitimate infants per 1,000 legitimate live births				..	..	..	..	..	..	24
Illegitimate infants per 1,000 illegitimate live births				..	..	..	..	..	..	—
Deaths from measles (all ages)	..	..	..	..	..	..	..	..	..	—
Deaths from whooping cough (all ages)			..	..	..	..	..	..	..	—
Deaths from diarrhoea (under 2 years of age)	..	..	..	..	..	..	..	..	..	—

The following table gives details of birth rate, death rate, infantile mortality rate and estimated population during the last 50 years.

Year	Birth Rate	Death Rate	Infantile Mortality Rate	Estimated Population
1907	32·29	15·45	146	62,500
1908	32·75	16·92	142	64,000
1909	31·78	12·94	116	65,000
1910	28·21	13·73	130	66,500
1911	28·85	16·63	161	62,700
1912	29·53	15·79	119	63,500
1913	30·15	15·56	144	64,500
1914	30·32	15·43	118	65,300
1915	28·02	17·13	129	65,300
1916	27·60	15·55	130	65,300
1917	24·79	13·90	97	65,300
1918	24·91	19·61	132	65,300
1919	22·75	13·19	91	72,800
1920	27·77	11·45	100	72,800
1921	28·54	13·13	86	68,045
1922	25·45	12·06	86	69,100
1923	23·85	11·30	100	70,000
1924	23·88	12·75	96	70,260
1925	22·27	11·74	83	70,300
1926	21·82	10·34	65	70,600
1927	20·76	13·46	90	70,080
1928	19·05	10·58	71	70,530
1929	20·01	12·13	83	70,790
1930	18·72	10·50	74	70,390
1931	18·18	12·03	92	70,130
1932	18·11	11·15	70	69,820
1933	16·53	12·06	84	69,370
1934	17·30	10·30	49	68,900
1935	17·01	11·53	69	68,700
1936	16·98	11·98	71	74,965
1937	16·99	11·42	50	75,740
1938	17·82	10·54	52	76,430
1939	16·88	10·86	53	76,960
1940	18·01	12·39	62	75,740
1941	17·86	11·43	66	75,770
1942	18·08	10·31	50	75,040
1943	18·81	12·12	65	74,250
1944	23·28	11·68	60	75,260
1945	20·09	11·73	56	75,630
1946	22·49	10·96	51	78,610
1947	23·87	10·86	57	79,920
1948	20·11	10·50	70	81,450
1949	18·69	10·63	53	82,030
1950	17·44	10·33	50	82,800
1951	17·61	11·91	28	81,670
1952	16·25	10·46	32	81,800
1953	16·16	10·10	32	82,070
1954	16·50	10·68	22	82,260
1955	16·02	11·00	26	82,530
1956	17·22	10·58	24	82,850

Causes of Death with Death Rates,
1956.

Disease	No. of deaths			Death rate per 1,000 population
	Males	Females	Total	
1. Tuberculosis, respiratory	8	—	8	0·10
2. Tuberculosis, other forms	1	1	2	0·02
3. Syphilitic disease	3	2	5	0·06
4. Diphtheria	—	—	—	—
5. Whooping Cough	—	—	—	—
6. Meningococcal infections	1	—	1	0·01
7. Acute poliomyelitis	—	—	—	—
8. Measles	—	—	—	—
9. Other infective and parasitic diseases ..	2	—	2	0·02
10. Malignant neoplasm, stomach	12	11	23	0·28
11. Malignant neoplasm, lung, bronchus ..	33	2	35	0·42
12. Malignant neoplasm, breast	—	11	11	0·13
13. Malignant neoplasm, uterus	—	1	1	0·01
14. Other malignant and lymphatic neoplasms	41	46	87	1·05
15. Leukaemia, aleukaemia	—	2	2	0·02
16. Diabetes	—	7	7	0·08
17. Vascular lesions of nervous system ..	48	68	116	1·40
18. Coronary disease, angina	77	33	110	1·33
19. Hypertension with heart disease	16	11	27	0·33
20. Other heart disease	43	52	95	1·15
21. Other circulatory disease	34	29	63	0·76
22. Influenza	1	2	3	0·04
23. Pneumonia	18	16	34	0·41
24. Bronchitis	43	21	64	0·77
25. Other diseases of respiratory system ..	6	—	6	0·07
26. Ulcer of stomach and duodenum	8	1	9	0·11
27. Gastritis, enteritis and diarrhoea	1	—	1	0·01
28. Nephritis and nephrosis	6	6	12	0·14
29. Hyperplasia of prostate	9	—	9	0·11
30. Pregnancy, childbirth, abortion	—	4	4	0·05
31. Congenital malformations	5	3	8	0·10
32. Other defined and ill-defined diseases ..	44	37	81	0·98
33. Motor vehicle accidents	7	3	10	0·12
34. All other accidents	19	12	31	0·38
35. Suicide	7	3	10	0·12
36. Homicide and operations of war	—	—	—	—
	493	384	877	10·58

In the following table the causes of death at different periods of life, as supplied by the Registrar General, are given for the year :

Cause of death	MALES									FEMALES									Total
	0-	1-	5-	15-	25-	45-	65-	75-	Total	0-	1-	5-	15-	25-	45-	65-	75-	Total	
Tuberculosis, respiratory	-	-	-	-	-	6	2	-	8	-	-	-	-	-	-	-	-	-	8
Tuberculosis, other ..	-	-	-	-	-	1	-	-	1	-	-	-	-	1	-	-	-	1	2
Syphilitic disease ..	-	-	-	-	1	1	1	-	3	-	-	-	-	-	1	-	1	2	5
Diphtheria	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Whooping cough	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Meningococcal infections..	-	-	-	-	-	1	-	-	1	-	-	-	-	-	-	-	-	-	1
Acute poliomyelitis ..	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Measles	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other infective and parasitic diseases	1	-	-	-	1	-	-	-	2	-	-	-	-	-	-	-	-	-	2
Malignant neoplasm, stomach	-	-	-	-	-	3	3	6	12	-	-	-	-	-	2	2	7	11	23
Malignant neoplasm, lung, bronchus	-	-	-	-	2	15	12	4	33	-	-	-	-	-	2	-	-	2	35
Malignant neoplasm, breast	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5	2	4	11	11
Malignant neoplasm, uterus	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1	1
Other malignant and lymphatic neoplasms ..	-	-	-	-	1	12	13	15	41	-	-	-	3	7	16	14	6	46	87
Leukaemia, aleukaemia ..	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1	2	2
Diabetes	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5	2	7	7
Vascular lesions of nervous system	-	-	-	1	3	7	12	25	48	-	-	-	-	-	13	22	33	68	116
Coronary disease, angina..	-	-	-	-	3	25	26	23	77	-	-	-	-	-	7	14	12	33	110
Hypertension with heart disease	-	-	-	-	-	6	3	7	16	-	-	-	-	-	2	5	4	11	27
Other heart disease ..	-	-	-	-	2	6	13	22	43	-	-	-	-	3	8	8	33	52	95
Other circulatory disease..	-	-	-	1	-	6	7	20	34	-	-	-	-	1	4	7	17	29	63
Influenza	-	-	-	-	-	-	1	-	1	-	-	-	-	-	-	1	1	2	3
Pneumonia	2	-	-	-	-	3	5	8	18	3	1	-	-	1	1	5	5	16	34
Bronchitis	-	-	-	-	-	9	21	13	43	-	-	-	-	1	2	6	12	21	64
Other diseases of the respiratory system ..	-	-	-	-	-	4	2	-	6	-	-	-	-	-	-	-	-	-	6
Ulcer of stomach and duodenum	-	-	-	-	2	4	1	1	8	-	-	-	-	-	-	-	1	1	9
Gastritis, enteritis and diarrhoea.. ..	-	-	-	-	1	-	-	-	1	-	-	-	-	-	-	-	-	-	1
Nephritis and nephrosis ..	-	-	-	-	-	3	3	-	6	-	-	-	-	1	1	3	1	6	12
Hyperplasia of prostate ..	-	-	-	-	-	2	4	3	9	-	-	-	-	-	-	-	-	-	9
Pregnancy, childbirth, abortion	-	-	-	-	-	-	-	-	-	-	-	-	2	2	-	-	-	4	4
Congenital malformations..	2	2	-	-	1	-	-	-	5	3	-	-	-	-	-	-	-	3	8
Other defined and ill-defined diseases ..	15	-	2	-	3	4	5	15	44	6	-	-	-	2	6	11	12	37	81
Motor vehicle accidents	-	1	-	2	1	1	-	2	7	-	-	-	-	1	-	1	1	3	10
All other accidents ..	2	-	-	1	4	3	3	6	19	-	-	1	1	-	-	3	7	12	31
Suicide	-	-	-	-	3	2	-	2	7	-	-	-	1	-	1	1	-	3	10
Homicide and operations of war	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total—all causes ..	22	3	2	5	28	124	137	172	493	12	1	1	7	21	72	110	160	384	877

INFANTILE MORTALITY.

The following table gives details of the deaths registered during the year which were under one year of age :—

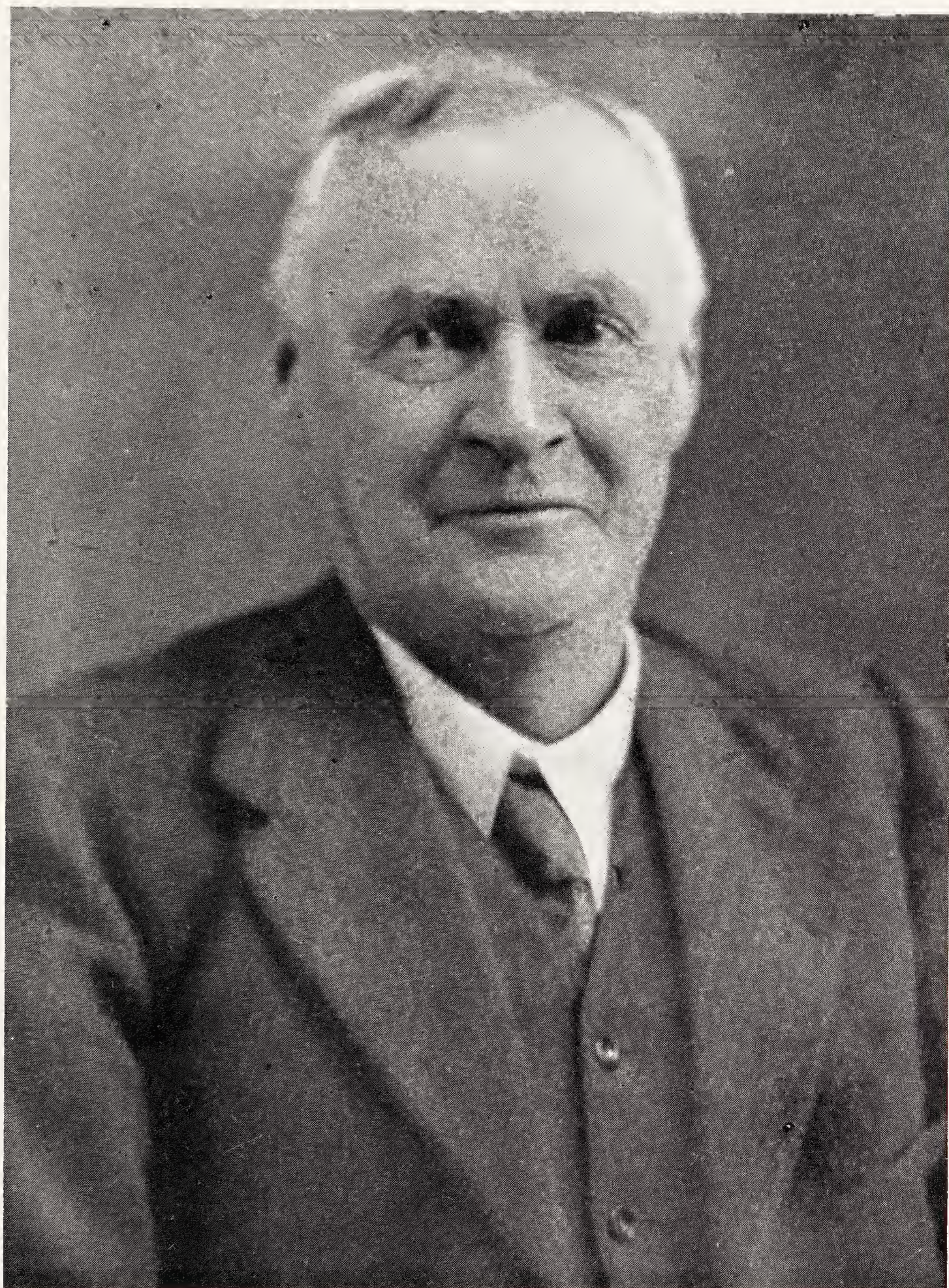
R.G's Code No.	Cause of death	Under 1 day	1 day	2 days	3 days	4 days	5 days	6 days	7-13 days	14-20 days	21-28 days	Total under 4 wks	4 wks to 3 mths	3-5 mths	6-8 mths	9-11 mths	Total under one year
9	Other infective and parasitic disease																
	Septicaemia	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
23	Pneumonia																
	Broncho pneu- monia	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	2
	Other forms	-	-	-	-	-	-	-	-	1	-	1	-	2	-	-	3
31	Congenital malformations																
	All forms	2	-	-	-	-	-	-	1	-	-	3	-	1	1	-	5
32	Other defined and ill-defined diseases																
	Birth injury	-	1	-	-	-	-	-	-	-	-	1	-	-	-	-	1
	Prematurity with	4	-	-	-	-	-	-	-	-	-	4	-	-	-	-	4
	Atelectasis	4	2	1	-	-	-	-	-	-	-	7	-	-	-	-	7
	Birth injury	1	1	-	-	-	-	-	-	-	-	2	-	-	-	-	2
	Congenital malformations	1	-	-	-	-	1	-	-	-	-	2	-	-	-	-	2
	Atelectasis with	1	1	-	1	-	-	-	-	-	-	3	-	-	-	-	3
	Congenital malformation	1	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1
	Other causes	-	-	-	-	-	-	-	-	1	-	1	-	-	-	-	1
34	All other acci- dents Asphyxia	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	2
	Totals	14	5	1	1	-	1	-	1	2	-	25	1	7	1	-	34

CANCER

The following table gives the localisation of the disease, the number of deaths and the death rate per 1,000 population annually for the past ten years :—

	1947		1948		1949		1950		1951		1952		1953		1954		1955		1956	
	No.	Death rate	No.	Death rate	No.	Death rate	No.	Death rate	No.	Death rate	No.	Death rate	No.	Death rate	No.	Death rate	No.	Death rate	No.	Death rate
Stomach and duodenum	21	0·26	34	0·42	22	0·27	31	0·37	26	0·32	34	0·41	38	0·46	26	0·32	18	0·22	23	0·28
Lung, bronchus							17	0·21	24	0·29	31	0·38	18	0·22	30	0·37	29	0·35	35	0·42
Breast	15	0·19	11	0·13	12	0·14	18	0·22	11	0·13	10	0·12	14	0·17	10	0·12	10	0·12	11	0·13
Uterus	6	0·07	7	0·09	9	0·11	7	0·08	9	0·11	6	0·07	10	0·12	7	0·09	4	0·05	1	0·01
Other sites	67	0·84	105	1·29	108	1·32	76	0·92	83	1·02	79	0·97	80	0·98	82	1·00	72	0·87	87	1·05
Total deaths and death rates from cancer	109	1·36	157	1·93	151	1·84	149	1·80	153	1·87	160	1·95	160	1·95	155	1·90	133	1·61	157	1·89
Total deaths and death rates all causes	868	10·86	855	10·50	872	10·63	856	10·33	973	11·91	856	10·46	829	10·10	879	10·68	908	11·00	877	10·58
Proportion, cancer deaths to total deaths, - 1 in	7·96		5·45		5·77		5·74		6·36		5·71		5·18		5·67		6·83		5·59	

Note—Deaths from cancer of the lung or bronchus were included in “other sites” prior to 1950.



DR. ALFRED ROBINSON,
Rotherham's first full-time Medical Officer of Health,
1907

SANITARY CIRCUMSTANCES

Although not so badly affected as some of the larger authorities in the industrial areas it was the worst year since the staff shortage began to develop. Over the year there was an average shortage of more than twenty per cent. inspectorial staff and during some periods only half the staff were available.

The severe gales in March caused extensive damage and created a backlog of repairs which took much of the year to reduce and further added to the difficulties.

Thanks to the efforts of the staff, who were most co-operative in taking over additional districts and filling in gaps where necessary, there was no serious dislocation of the work. There was a reduction in visits to registered premises and in food sampling, but basic public health duties were maintained.

Mr. T. W. Pearce, Deputy Chief Sanitary Inspector, retired in August after 40 years' service. During those years Mr. Pearce gave splendid service to the Corporation and it is hoped that his health, which has not been good for some years, will improve and allow him to enjoy a well earned retirement.

The Corporation withdrew from the Sheffield, Rotherham and District Smoke Abatement Committee on March 31st, and statutory powers concerning atmospheric pollution were vested in the Sanitary Sub-Committee. Thanks to the interest of the Council in this work all the District Public Health Inspectors are now studying for the Smoke Inspectors' Certificate.

In July the Food Hygiene Regulations, 1955, became fully operative, but it was not until October that it was possible to devote the time required for an extensive inspection of all food establishments in the area. Fortunately, during the past eight years a very satisfactory standard was attained in the food premises of the district and the only major alteration required by the Regulations in most premises was in the provision of additional washing facilities.

During August the Royal Assent was given to the Sanitary Inspectors (Change of Designation) Act, 1956, and sanitary inspectors employed by local authorities in England and Wales automatically became public health inspectors, a designation felt to be more accurate in describing the duties undertaken. The sanitary inspector may be officially dead, but it will be a long time before the public become used to the new designation and allow the old one to be forgotten.

Looking back over the year's work it seems clear that, having regard to the difficulties experienced by many authorities in industrial areas, Rotherham was more fortunate than most.

WATER

42 samples of drinking water, all of which were satisfactory, and 14 samples of swimming bath water were taken for examination. Three samples of swimming bath water were unsatisfactory. The results of all examinations of swimming bath water are sent to the Baths Superintendent and give a check on his own frequent tests of the quality of the bath water.

SANITARY ACCOMMODATION

(a) HOUSE DRAINAGE

2,364 visits were made in connection with drain tests, defective drains and drainage appliances. In previous years comment has been made on the warnings given to contractors for carrying out drainage work without giving notice. Competent craftsmen have no fear of their work being inspected, and only too often unnotified drainage work is later found to be defective due to shoddy workmanship or ignorance of the principles of drainage.

A prosecution was undertaken in one case where drains were laid without notice and a conviction and penalty secured. No further breaches were found during the year.

Additional W.C.'s provided	...	...	...	17
Privy middens converted to W.C.'s	...	...	...	3
Ashpits abolished	...	...	...	1

(b) LICENCED PREMISES, CINEMAS, THEATRES

Improvements to the sanitary accommodation at a number of licensed premises were carried out without service of notice by the department, in accordance with the modernisation policy of the brewery companies. A very substantial improvement has been achieved in this type of premises over the past ten years.

(c) PUBLIC CONVENIENCES

Further progress was made in the refitting of public conveniences by the Borough Engineer's Department. The conveniences at Brinsworth Street, Church Street, Kimberworth and Market Street were modernised during the year and the contrast between the old and the new must be very noticeable to members of the public.

FATORIES

257 factory inspections were made as follows :

Type of factory	Number registered		Inspections	Notices
Non-mechanical	...	41	19	1
Mechanical	...	298	238	4

FACTORIES IN WHICH DEFECTS WERE FOUND :

Type of defect	Found	Remedied
Inadequate ventilation	—	—
Unreasonable temperature	—	—
Sanitary conveniences insufficient	—	—
Sanitary conveniences unsuitable or defective ...	14	12
Sanitary conveniences not separate for sexes ...	—	—

OFFENSIVE TRADES

Five visits were paid to the six offensive trades now registered. No complaints of nuisance were received in connection with these trades.

CANAL BOATS

Number of canal boats inspected	6
Number of persons on board :	
Male adults	6
Female adults	Nil
Number of cases of infectious disease	Nil
Number of infringements observed	Nil
Number of notices served	Nil
Number of notices complied with	Nil
Number of notices outstanding	Nil
Legal proceedings taken	Nil

HOUSING

(a) DEMOLITION AND CLOSURE

Representations were made to the Sanitary Sub-Committee concerning clearance areas in Thornhill comprising 220 dwelling houses. Later in the year the Special Joint Committee on Unfit Houses declared the Thornhill Nos. 1 to 3 Clearance Areas. A further Clearance Area of 24 houses (Greasbrough Road No. 1) was the subject of a Compulsory Purchase Order, as yet unconfirmed.

29 unfit houses owned by the Corporation were vacated and demolished or put to other uses. 27 other houses were submitted to the Sanitary Sub-Committee as being unfit for human habitation and incapable of being repaired at reasonable expense.

The publicity given by the Council to the importance of would-be house purchases making full enquiries as to the slum clearance position before purchasing a house led to a large number of requests for information. Enquiries were received in respect of 192 houses.

105 houses were visited in connection with applications for mortgages, to ensure that the period of repayment and probable life of the house were properly related.

(b) NUISANCES AND DISREPAIR

1,879 complaints of nuisance and disrepair were received during the year. 3,522 houses were involved in the total nuisances found as a result of complaints or during inspection of the district.

24 applications under the Housing Repairs and Rents Act, 1954, for certificates of disrepair were made during 1956. Of the 64 certificates issued since the Act came into operation only 33 have been withdrawn. From these figures it is apparent that the Act has not yet made any major contribution to the repair of old property.

Contractors had a difficult year following the March gales. Roofs, gutters and chimneys throughout the town were extensively damaged and had to be dealt with on a priority basis to attempt to minimise the discomfort experienced by tenants and to reduce as far as possible further damage to properties. As a result much other repair work had to be left and there were delays of several months before routine repairs could be dealt with. Fortunately, by the end of the year a more normal position was reached.

SUMMARY OF HOUSING ACTION

I.—Inspection of dwelling houses :

(1) Number of houses inspected for housing defects under Public Health or Housing Acts	1515
(2) Number of houses (included under sub head (1) above) which were inspected and recorded under the Housing Consolidated Regulations	99
(3) Number of houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	65
(4) Number of dwelling houses (exclusive of those referred to under the preceding sub-head) found to be not in all respects reasonably fit for human habitation	1333

II.—Remedy of Defects during the year without service of formal notice :

Number of dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers (including houses with minor defects)	880
--	-----

III.—Action under statutory powers :

A. Proceedings under section 9, 10 and 16 of the Housing Act, 1936. Nil

B. Proceedings under Public Health Acts.

(1) Number of dwelling houses in respect of which formal notices were served requiring defects to be remedied	463
(2) Number of dwelling houses in which defects were remedied after service of formal notices :	
(a) By owners	397
(b) By Local Authority in default of owners	—

C. Proceedings under Sections 11 and 13 of the Housing Act, 1936.

(1) Number of dwelling-houses in respect of which demolition orders were made	...	...	...	...	...	...	...	20
(2) Number of dwelling houses in respect of which closing orders were made	...	...	...	...	...	...	...	1
(3) Number of individual unfit houses demolished	...	...	...	...	...	...	...	37
(4) Number of dwelling houses in respect of which undertakings as to future user were accepted and which ceased to be used as dwellings	...	...	...	...	...	...	...	6

Details of legal proceedings under the Public Health Act, 1936.

Case No.	Date	Default or offence	Result	Penalty
1	5.1.56	Non-compliance with Notice under Section 39.	Withdrawn, work done	—
2	5.1.56	Non-compliance with Abatement Notice	„ „	—
3	16.2.56	Non-compliance with Abatement Notice	Nuisance order made	—
4	16.2.56	„ „ „	„ „	—
5	23.2.56	„ „ „	Withdrawn work done	—
6	29.3.56	Non-compliance with Section 41	Conviction	£2 fine
7	26.4.56	Non-compliance with Notice under Section 39.	Withdrawn, work done	—
8	3.5.56	Non-compliance with Abatement Notice	„ „	—
9	17.5.56	„ „ „	„ „	—
10	12.7.56	„ „ „	„ „	—
11	19.7.56	„ „ „	Nuisance Order made	—
12	19.7.56	„ „ „	„ „	—
13	19.7.56	Non-compliance with Notice under Section 39.	Conviction	£2 fine
14	27.9.56	„ „ „	Withdrawn, work done	—
15	27.9.56	Non-compliance with Abatement Notice	„ „	—
16	13.12.56	„ „ „	Adjourned, work in hand	—
17	20.12.56	Non-compliance with Nuisance Order	„ „	—
18	20.12.56	Non-compliance with Notice under Section 39.	„ „	—
19	27.12.56	Non-compliance with Abatement Notice	„ „	—

HOUSES-LET-IN-LODGINGS

Five inspections were made of the thirteen houses-let-in-lodgings.

COMMON LODGING HOUSES

Four inspections were made of the Westgate lodging house which was well maintained and conducted.

TENTS, VANS AND SHEDS

Moveable dwellings were licensed as follows :

New licences	...	...	...	...	...	16
Licences renewed		...	...	...	...	39
Licences refused	...	...	...	...	...	5
Licences surrendered	...	...	...	...	...	19

The movement of contract workers engaged on opencast mining and construction work at the new gas works was responsible for the high figures of licences granted and surrendered. The number of "residential" caravans is unlikely to increase greatly as all the suitable available sites on farms have been taken up.

The reluctance to grant licences for moveable dwellings which appears to exist in some adjoining districts continues to create a pressure from caravan dwellers or would-be caravan dwellers wishing to move into Rotherham. Regular enquiries are received from persons wishing to bring caravans into the district but, as has already been stated, the number of suitable sites available is very limited.

VERMINOUS PREMISES

711 inspections of Corporation houses and the houses of prospective tenants were made. Evidence of vermin was found on 15 occasions. Similar inspections were made of the effects of 14 families offered tenancies of houses by other Authorities.

The incidence of infestation in all premises treated was as follows :

	Bugs	Cockroaches	Other pests	Total
Corporation houses ...	31	31	16	78
Private premises ...	42	37	22	101
	—	—	—	—
	73	68	38	179
	—	—	—	—
Percentage infestation				
in all premises ...	41%	38%	21%	

PHARMACY AND POISONS

175 licences were issued authorising the sale of poisons included in part 2 of the Poisons List.

RATS AND MICE DESTRUCTION

(a) SEWER TREATMENT

Due to staff shortage it was not possible to carry out the full half yearly maintenance treatment of the sewers. Facilities were made available for a technical officer of the Ministry of Agriculture, Fisheries and Food to continue the special treatment of one sewer system for research purposes.

(b) INSPECTION AND TREATMENT OF PREMISES

The free service given to occupiers of dwellings and business premises for the destruction of rats and mice continued to operate satisfactorily. There can be little doubt that a free service of this nature ensures the maximum co-operation from occupiers in reporting rodent infestation, with a consequent saving in time spent in searching for infestations.

The following details have been extracted from the annual report required by the Ministry of Agriculture and Fisheries :

	Type of Property				
	Local Authority	Dwelling houses	Agricultural	Business etc.	Total
Complaints received	21	365	8	110	504
Other inspections made	43	17	10	462	532
Properties found to be infested by rats ..	48	108	18	133	307
Properties found to be infested by mice ..	7	100	—	61	168
Notices served for structural work ..	—	8	—	2	10

SHOPS

140 visits were made for the purposes of Section 38 of the Shops Act, 1950. This section deals with the provision of adequate facilities in shops employing assistants, including heating, lighting, ventilation, facilities for washing and the taking of meals, and sanitary accommodation. A good standard has been reached and is being maintained in all shops to which this section applies.

MILK

(a) SPECIAL DESIGNATIONS

All milk sold in Rotherham is now either "Pasteurised" "Sterilised" or "Tuberculin Tested," processing is done in plants situated in other districts, and the bulk of the milk consumed is produced in other areas. Few complaints of lack of cleanliness or keeping quality were received and these were, where possible, with the co-operation of inspectors of other areas, referred directly to the dairies concerned.

The following licences were issued in connection with the Milk (Special Designations) Regulations :

Dealer's "Tuberculin Tested"	23
Dealer's "Pasteurised"	22
Dealer's "Sterilised"	178
Supplementary "Tuberculin Tested"	21
Supplementary "Pasteurised"	21
Supplementary "Sterilised"	16

(b) BACTERIOLOGICAL EXAMINATION

31 samples of milk were taken to be examined by the Pathologist for the presence of tubercle bacilli. 1 of the samples was tuberculous, and the Divisional Veterinary Officer was notified in order that the herd could be examined and the diseased cow removed for slaughter.

ICE CREAM

Six samples of ice cream were submitted for bacteriological examination with the following results :

Satisfactory		Unsatisfactory	
Grade 1	Grade 2	Grade 3	Grade 4
4	1	—	4

The attention of the manufacturer and of the Medical Officer of Health of the manufacturing district was drawn to the unsatisfactory sample. The marked reduction in the number of samples taken was due to staff shortage.

SHELLFISH

All consignments of mussels inspected during the year had been submitted to an approved cleansing process.

FOOD PREMISES

The following list of premises and record of visits gives a picture of the types of food trades in the district and the time given to inspection :

Type	Unregistered premises						Inspections
						Number	
Bakehouses	37	31
Breweries	1	—
Cafes	24	20
Clubs and licensed premises	131	19
Confectioners	100	102
Factory canteens	26	9
Fish friers	65	38
Fishmongers	35	19
Fruiterers and Greengrocers	134	89
Grocers	345	325
Mineral water factories	5	3
School kitchens	15	5
Soft drinks bar	2	1
Sweet factories	2	1
Tripe purveyor	3	2

REGISTERED PREMISES

	Number						Inspections
Butchers	98	73
Food preparing premises	68	22
Hawkers	13	6
Ice cream factories	5	1
Ice cream shops or stores	283	25
Pickle factories	1	—
Tripe boilers	1	2

Improvements made in food premises during the year :

Additional sinks provided	2
Additional wash basins provided	10
Display covers provided for food	5
Hand washing notices displayed	1
Hot water supplies provided	11
Premises cleansed or repaired	4
Premises improved	4
Sales limited to pre-packed foods	3
Accommodation for clothing provided	2
Name and address displayed on stalls	1

The full effect of the Food Hygiene Regulations, 1955, will not be felt until 1957 when notices served in 1956 will be complied with. Traders generally have accepted the regulations and are prepared to co-operate in improving food standards. More time will need to be given to this work when the staffing situation improves.

FOOD POISONING

Only one major outbreak of food poisoning occurred during the year. Following a children's party and a church bazaar a number of people were acutely ill. It was found that all the patients had eaten potted meat manufactured in an adjoining district. Four food handlers found to be infected were excluded from work until free from infection. The manufacturer was requested to send no more potted meat into Rotherham until the matter had been thoroughly investigated and the Medical Officer of Health of the adjoining district was informed of the results of our investigations.

A number of cases were then found in the manufacturing area from the same source and all steps necessary to ensure safety in the manufacturing process were taken. There were 36 cases in Rotherham, the causative agent was bacillus salmonellae typhi murium.

MEAT

The following details of animals slaughtered at the public abattoir have been supplied by the Markets Superintendent :

Cattle	Calves	Sheep	Pigs	Total
8,350	226	15,762	13,959	38,297

The slaughter of pigs on private premises appears to have ceased, it must now be cheaper and easier to buy bacon than to rear it.

The estimated weight of fresh killed meat and offals condemned during the year was :

All causes	..	..	..	..	..	58 tons	17 cwts.
Tuberculosis only	..	..	..	..	..	30 tons	17 cwts.

All condemned meat is treated in the Municipal waste elimination plant at the public abattoir, from which fertilisers and animal feeding stuffs are produced.

The percentages of animals found to be diseased are given in the following table :

				Cattle excluding cows	Cows	Calves	Sheep	Pigs
Number killed								
Number inspected				4789	3561	226	15762	38297
All diseases except tuberculosis and cysticerci	..	..	..		
Whole carcasses condemned	..	..		4	15	10	19	23
Carcases of which some part or organ was affected	..	..	..	716	530	2	286	769
Percentage affected	..	..	..	15.0	15.3	5.3	1.9	2.1
Tuberculosis only :								
Whole carcasses condemned	..	..		10	22	—	—	3
Carcases of which some part or organ was affected	..	..	..	413	1139	—	—	52
Percentage affected	..	..	..	8.8	32.6	—	—	0.1
Cysticercosis :								
Carcases of which some part or organ was condemned	..	..	..	31	8	—	—	—
Carcases submitted to treatment by refrigeration	..	..	..	31	8	—	—	—
Generalised and totally condemned	..			—	—	—	—	—

All animals slaughtered at the private slaughterhouse were examined as follows :

				Cattle excluding cows	Cows	Calves	Sheep	Pigs
Number killed								
Number inspected	..	..	..	1186	42	—	4572	2240
All diseases except tuberculosis and cysticerci :								
Whole carcasses condemned	..	..		—	2	—	—	—
Carcases of which some part or organ was affected	..	..	..	304	4	—	117	39
Percentage affected	..	..	..	25.6	14.3	—	2.5	1.7
Tuberculosis only :								
Whole carcasses condemned	..	..		—	—	—	—	—
Carcases of which some part or organ was affected	..	..	..	57	20	—	—	50
Percentage affected	..	..	..	4.8	47.6	—	—	2.2
Cysticercosis :								
Carcases of which some part or organ was condemned	..	..	..	—	—	—	—	—
Carcases submitted to treatment by refrigeration	..	..	..	—	—	—	—	—
Generalised and totally condemned	..			—	—	—	—	—

The estimated weight of meat condemned was :

All causes	..	..	..	..	..	3 tons 4 cwts.
Tuberculosis only	..	..	..	..		1 ton 2 cwts.

MERCHANDISE MARKS ACT, 1926

322 visits were made in connection with the marking of food. The Marking Orders refer to the correct labelling of such food as apples, tomatoes, currants, ham, meat, dead poultry, margarine, malt products, frozen and chilled salmon and sea trout, and honey. In 21 instances the attention of vendors was drawn to incorrect markings.

SAMPLING OF FOOD AND DRUGS

153 samples of food and drugs were submitted to the Public Analyst for examination. 9 samples were reported to be not genuine. Details of all samples taken are given in the following table :

No.	Nature of sample	Genuine		Not reported as genuine	
		Formal	Informal	Formal	Informal
1	Beef suet	—	—	—	1
1	Blancmange powder	—	1	—	—
5	Butter	—	5	—	—
1	Butter drops	—	1	—	—
3	Cheese spread	—	3	—	—
1	Cocoa	—	1	—	—
1	Coffee chicory essence	—	1	—	—
1	Coffee powder	—	1	—	—
1	Condensed milk (full cream) ..	—	1	—	—
1	Condensed milk (skimmed) ..	—	1	—	—
1	Cornflour	—	1	—	—
1	Currants	—	1	—	—
1	Curry powder	—	1	—	—
1	Cake mixture	—	1	—	—
2	Ground almonds	—	2	—	—
1	Ground coffee	—	1	—	—
10	Ice cream	—	10	—	—
1	Lemon curd	—	1	—	—
1	Lemon squash	—	1	—	—
2	Luncheon meat	—	2	—	—
4	Malt vinegar	—	4	—	—
6	Margarine	—	6	—	—
1	Marmalade	—	1	—	—
1	Mushroom cream soup	—	1	—	—
91	Milk	83	—	8	—
1	Prunes	—	1	—	—
1	Raisins	—	1	—	—
1	Raisin flavoured non-alcoholic beverage	—	1	—	—
1	Raspberry jam	—	1	—	—
1	Redcurrant jelly	—	1	—	—
1	Rice	—	1	—	—
1	Saccharin tablets	—	1	—	—
1	Salad Cream	—	1	—	—

				Genuine		Not reported as genuine	
				Formal	Informal	Formal	Informal
1	Self Raising flour	—	1	—	—
1	Table jelly	—	1	—	—
1	Tomato cream soup	—	1	—	—
1	Tomato ketchup	—	1	—	—
1	White flour	—	1	—	—
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153				83	61	8	1
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SAMPLES REPORTED AS “NOT GENUINE.”

Formal Samples

No.	Article	Results of Analysis	Remarks and action taken
5485	Milk	Contained 1.80% Milk Fat Solids not fat 8.91% Water 89.29%	Deficient in Milk Fat 40% “Appeal to Cow” samples were also deficient in fat. Advice given as to mixing of the milk, intervals between milking and improvement of herd.
5486	Milk	Contained 2.37% Milk Fat. Solids not fat 8.83% Water 88.80%	Deficient in Milk Fat 21%.“Appeal to Cow”. Refers to No. 5485.
5487	Milk	Contained 2.96% Milk Fat. Solids not fat 8.91%	Slightly deficient in Milk Fat. “Appeal to Cow”. Refers to No. 5485.
5488	Milk	Contained 2.34% Milk Fat. Solids not fat 8.84% Water 88.82%	Deficient in Milk Fat 22% “Appeal to Cow”. Refers to No. 5485.
5489	Milk	Contained 1.77% Milk Fat. Solids not fat 8.84% Water 89.39%	Deficient in Milk Fat 41% “Appeal to Cow”. Refers to No. 5485.
5490	Milk	Contained 2.40% Milk Fat. Solids not fat 8.81% Water 88.79%	Deficient in Milk Fat 20% “Appeal to Cow”. Refers to No. 5485.
5491	Milk	Contained 2.77% Milk Fat. Solids not fat 8.89% Water 88.34%	Deficient in Milk Fat 7.6%. “Appeal to Cow”. Refers to No. 5485.
5492	Milk	Contained 2.99% Milk Fat. Solids not fat 9.20%	Slightly deficient in Milk Fat. “Appeal to Cow”. Refers to No. 5485.

Informal Samples

5574	Beef suet	Contained 82% fat.	Should contain not less than 83% fat. Attention of manufacturer drawn to the deficiency.
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FERTILISERS AND FEEDING STUFFS ACT, 1926

No samples were taken due to staff shortage.

OTHER FOOD

In the following table details are given of food surrendered or returned for salvage during the year :

				Number	lbs.					Number	lbs.
Bacon	..	..	..	-	42	Fowls	..	..	..	-	70
Bottles	..	..	..	10	-	Ham	..	..	..	-	31
Butter	..	..	..	-	6	Jars	..	..	..	114	-
Cake	..	..	..	-	101	Margarine	..	..	..	-	13
Cheese	..	..	..	-	189	Packed goods	..	..	..	43	-
Cooked meats	..	..	..	-	252	Pork pie	..	..	..	-	1
Currant puddings	..	..	..	-	3	Sausage	..	..	..	-	468
Dried fruit	..	..	..	-	5	Shellfish	..	..	..	-	28
Fish	..	..	..	-	94	Tinned goods	..	..	..	2892	-
Fish cakes	..	..	..	73	-	Table jellies	..	..	..	1	-
Fish roes	..	..	..	-	14	Tomatoes	..	..	..	-	42
Flour	..	..	..	-	3						

Condemned or surrendered food other than meat is disposed of in three ways. Certain rationed foods are returned through trade channels for processing in accordance with arrangements made by the Ministry of Food. Other food suitable for pig feeding is sent, if in sufficient quantity, to be processed in a waste elimination plant. The remaining materials including canned foods are buried by the Cleansing Department in the controlled tip.

ATMOSPHERIC POLLUTION

When the Corporation withdrew from the Sheffield, Rotherham and District Committee on the 31st March, 1956, and delegated its powers concerning atmospheric pollution to the Sanitary Sub-Committee there was only one qualified smoke inspector in the department. Shortly afterwards the Deputy Chief Public Health Inspector obtained the qualification, and it is pleasing to report that all five District Public Health Inspectors are now studying for this examination.

The complete absence of information concerning processes and furnaces in the area necessitated the making of a survey of all factories and large business premises to obtain the required information. At the same time the opportunity was taken to discuss the provisions of the Clean Air Act with managements and to establish personal contact with engineers responsible for plant operation.

The survey was incomplete when the fuel crisis arose and aroused doubts in the minds of managements concerning imported fuels. This may prove to be a major set-back in the clean air campaign. Liquid fuels are relatively smokeless and easily controlled, but in addition to doubts as to future price levels for oil, the possibility of restricted supplies due to outside agencies is a serious disadvantage which must be considered when deciding on the type of fuel burning equipment to instal.

In addition to ordinary observations at works, the telephone is being used to combat smoke nuisance. From the office windows many industrial chimneys can be seen. The telephone number and name of the engineer of each firm is listed, and when heavy smoke production is noticed a telephone call to the engineer has produced remarkably quick results in abating the nuisance.

The general impression obtained from managements interviewed is that every co-operation will be given in securing a reduction in atmospheric pollution.

On the 31st December, 1956, certain provisions of the Clean Air Act, 1956, came into force. These were considered by the Sanitary Sub-Committee and administrative arrangements were put into operation to secure that new furnaces and new chimneys complied with the provisions of the Act. It was recommended that the new Model Byelaw concerning heating and cooking arrangements in new buildings be adopted. A recommendation was also made that, in view of the many committees affected, the Special Joint Committee be asked to consider the whole question of smoke control areas and make recommendations to the Sanitary Sub-Committee.

Records were maintained as before of atmospheric pollution in the County Borough and a fifth station was established at Ferham House towards the end of the year. Details of the pollution recorded by the soot deposit gauges and the sulphur absorption lead cone at all the stations are given in summary form in the following tables :

Total soot deposit in tons per square mile per month.

Month	Blackburn	Erskine Road	Oakwood Hall Hospital	Technical College	Ferham House
January	32.88	23.72	14.21	26.05	—
February	18.51	12.16	4.87	22.36	—
March	20.94	22.30	10.42	26.26	—
April	20.60	24.02	15.16	29.42	—
May	17.21	18.09	14.18	19.73	—
June	21.52	23.31	17.57	28.25	—
July	18.99	24.12	15.86	26.09	—
August	18.71	31.90	15.63	5.79	—
September	21.49	19.44	14.35	20.62	—
October	18.58	26.31	14.45	21.19	—
November	15.36	18.83	12.70	22.36	15.92
December	36.14	27.26	12.67	22.78	27.34
Totals	260.93	271.46	162.07	270.90	43.26
Averages	21.74	22.62	13.50	22.57	21.63

The following table gives the average annual deposit during the last five years :

Year		Blackburn	Erskine Road	Oakwood Hall Hosp.	College of Technology	Ferham House
1952	...	38.80	27.00	15.87	19.34	—
1953	...	27.25	25.09	14.54	20.88	—
1954	...	25.60	29.32	17.55	24.63	—
1955	...	29.17	19.86	15.99	32.55	—
1956	...	21.74	22.62	13.50	22.57	*21.63

*Average for two months only.

Sulphur determination by the lead peroxide method expressed in milligrams of SO₃/day per square centimetres :

Month		Blackburn	Erskine Road	Oakwood Hall Hospital	Technical College	Ferham House
January	.. ..	3.89	5.20	3.37	4.81	—
February	.. ..	2.57	4.19	2.84	4.85	—
March	.. ..	2.68	2.88	1.72	2.72	—
April	.. ..	1.75	2.76	1.56	3.24	—
May	.. ..	1.92	3.16	2.29	2.63	—
June	.. ..	2.19	3.05	1.36	2.99	—
July	.. ..	1.37	2.45	0.91	1.90	—
August	.. ..	1.57	3.02	1.14	2.45	—
September	.. ..	2.25	2.68	1.06	2.36	—
October	.. ..	2.51	3.99	2.01	4.01	—
November	.. ..	2.62	4.09	2.82	4.98	4.46
December	.. ..	3.86	5.60	2.60	4.61	5.72
Totals	.. ..	29.18	43.07	23.68	41.55	10.18
Averages	.. ..	2.43	3.59	1.97	.46	5.09

The following table gives the average annual determination during the last five years :

Year		Blackburn	Erskine Road	Oakwood Hall Hosp.	College of Technology	Ferham House
1952	...	1.43	2.53	1.74	2.31	—
1953	...	1.95	3.17	1.77	3.30	—
1954	...	2.61	3.64	1.81	3.49	—
1955	...	2.40	3.06	1.84	3.22	—
1956	...	2.43	3.59	1.97	3.46	*5.09

*Average for two months only.

CLERICAL WORK

To complete the picture of work done by the section during the year, details of office interviews and outgoing correspondence are of interest. 1,878 complaints from residents were dealt with. 2,130 informal notices and 511 statutory notices were served, and 529 licences were issued. Including reminder notices and other letters, 4,038 postal packages were sent out during the year.

SUMMARY OF PUBLIC HEALTH INSPECTORS' VISITS AND NOTICES SERVED DURING THE YEAR ENDING 1956.

Diseases of Animals Act	2	Verminous premises	175
Merchandise Marks Act	21	Revisits to verminous premises ..	2
Water supply	122	Miscellaneous housing visits	680
Drainage	2229	Infectious disease enquiries	131
Stables and piggeries	5	Visits re disinfection	137
Offensive trades	5	Miscellaneous infectious disease visits	388
Fried fish shops	38	Visits to slaughterhouses	294
Common lodging houses	4	Butchers	73
Houses let in lodgings	5	Canteens	9
Tents, vans, and sheds	102	Dairies and milk distributors	46
Canal boats	4	Fishmongers and poulterers	19
Factories	238	Food preparing premises	22
Workshops	19	Grocers	325
Workplaces	2	Greengrocers and fruiterers	89
Drain tests	135	Ice cream premises	25
Bakehouses	31	Market stalls	322
Pharmacy and poisons	62	Restaurants	20
Public conveniences	3	Street vendors and hawkers carts ..	6
Licensed premises	19	Sweet shops	102
Interviews	1293	Milk—bacteriological	127
Pet Animals Act	8	Milk—tubercle bacilli	39
Rats and mice	75	Ice cream	7
Atmospheric pollution	47	Food and drug	137
Schools	1	Miscellaneous food visits	202
Shops	140	Water samples	58
Miscellaneous sanitary visits	2977	No. of nuisances found	3996
Hairdressers	60	No. of nuisances abated	3470
Matters referred to other Depts. ..	199	Verbal notices served	386
Houses inspected under Public Health		Verbal notices complied with	341
Acts	1416	Informal notices served	1799
Re-inspections of above houses	4645	Informal notices complied with	1616
Houses inspected under Housing Acts	105	Statutory notices served	511
Re-inspections of above houses	83	Statutory notices complied with	517
Overcrowding inspections	15		

PUBLIC MORTUARY

The arrangements whereby the mortuary at the Moorgate General Hospital was used as a public mortuary was continued throughout the year and 98 bodies were received there and detained for 361 days. The post-mortem room was used on 97 occasions. Payment is made to the local Hospital Management Committee on a basis of 5s. per day per body and £1 1s. for each occasion the post-mortem room is used.

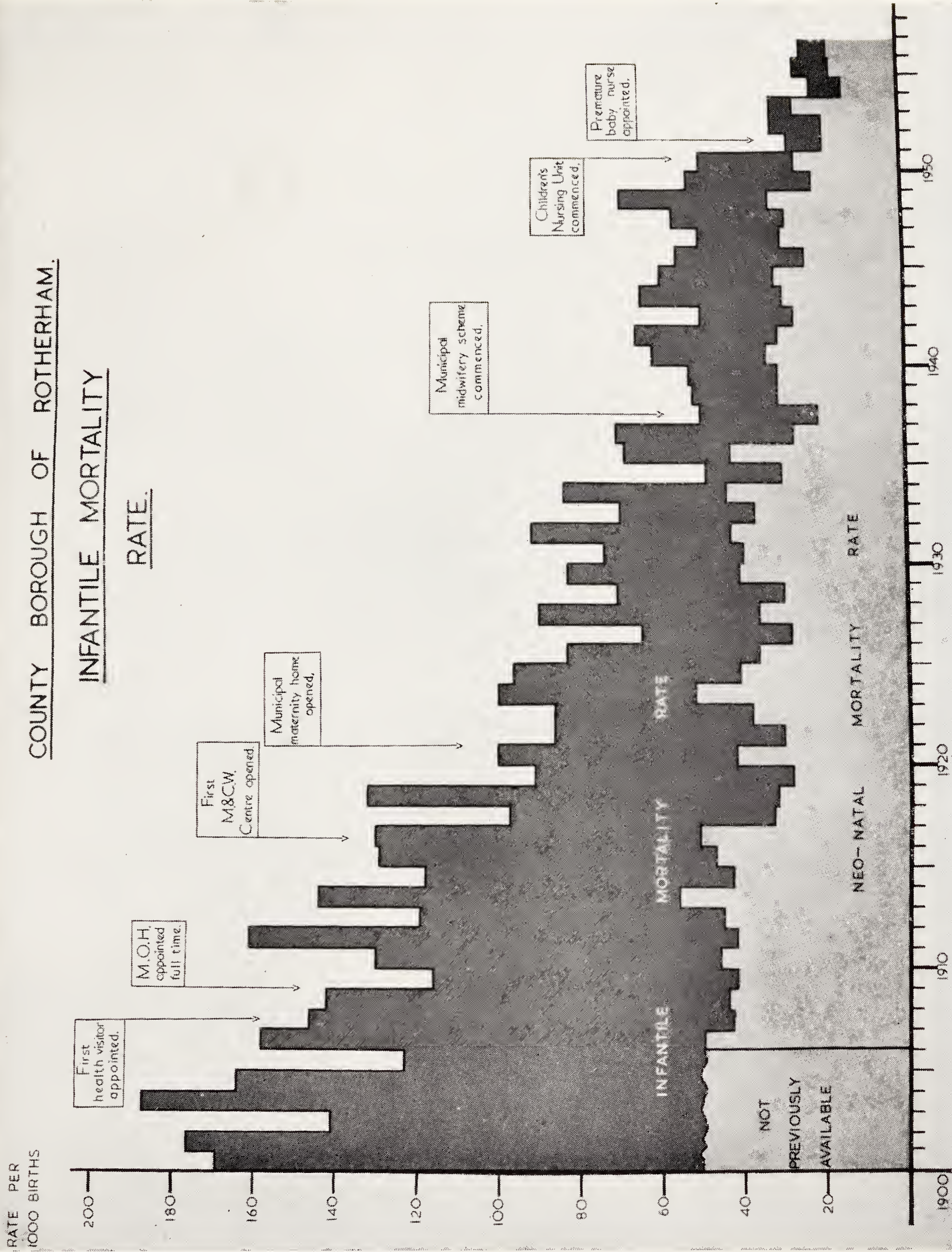
AGED AND INFIRM PERSONS

No application was made under Section 1 (3) of the National Assistance (Amendment) Act, 1951, for a removal order during the year.

COUNTY BOROUGH OF ROTHERHAM.

INFANTILE MORTALITY

RATE.



GRAPH SHOWING INFANTILE MORTALITY RATE SINCE THE BEGINNING OF THE CENTURY

INFECTIOUS DISEASES AND TUBERCULOSIS

The prevalence of the infectious diseases notifiable in the county borough is shown in the following table: —

Disease	1952	1953	1954	1955	1956
Acute encephalitis—Infective	—	1	—	1	—
Post-infectious	—	1	—	—	—
Acute poliomyelitis—Paralytic	3	2	1	8	—
Non-paralytic	1	1	—	3	—
Diphtheria	3	—	—	—	—
Dysentery	—	5	26	72	174
Encephalitis lethargica	—	—	—	—	—
Erysipelas	17	16	13	7	6
Malaria	1	—	—	—	—
Measles	1120	847	130	2072	21
Meningococcal infection	5	2	2	3	3
Ophthalmia neonatorum	2	1	1	—	1
Pemphigus neonatorum	2	1	—	—	1
Pneumonia	120	50	53	29	32
Puerperal pyrexia	23	27	25	10	47
Relapsing fever	—	—	—	—	—
Scarlet fever	41	51	109	90	80
Smallpox	—	—	—	—	—
Typhoid and paratyphoid fevers	1	—	1	—	—
Typhus fever	—	—	—	—	—
Whooping cough	141	220	45	45	93
Tuberculosis—respiratory	55	54	42	56	59
other forms	10	9	5	6	6
Food poisoning	5	14	3	12	48
Totals	1550	1302	456	2414	571

In the following table details are given of the age and ward distribution of the notifications received, together with the numbers of cases removed to hospital and the deaths occurring: —

Notifiable disease	No. of cases notified												Total cases notified in each ward of the borough										Total cases removed to hospital	Total deaths																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																									
	At ages—years												Clifton	East	Greasbrough	Kimberworth	Masbro'	North	St. Ann's	South	Thornhill	West																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																											
	At all ages	Under 1 year	1 to 2 years	2 to 3 years	3 to 4 years	4 to 5 years	5 to 10 years	10 to 15 years	15 to 20 years	20 to 35 years	35 to 45 years	45 to 65 years													65 years and over																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								
Acute encephalitis—infective ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

The following table gives details of the notifications received monthly throughout the year : —

Notifiable disease	January	February	March	April	May	June	July	August	September	October	November	December	Total
Acute encephalitis-infective ..	-	-	-	-	-	-	-	-	-	-	-	-	-
Post infectious	-	-	-	-	-	-	-	-	-	-	-	-	-
Acute poliomyelitis-paralytic ..	-	-	-	-	-	-	-	-	-	-	-	-	-
Non-paralytic	-	-	-	-	-	-	-	-	-	-	-	-	-
Diphtheria	-	-	-	-	-	-	-	-	-	-	-	-	-
Dysentery	-	1	3	5	9	4	137	7	2	5	-	1	174
Encephalitis lethargica ..	-	-	-	-	-	-	-	-	-	-	-	-	-
Erysipelas	-	1	2	-	1	-	1	-	1	-	-	-	6
Malaria	-	-	-	-	-	-	-	-	-	-	-	-	-
Measles	-	-	1	1	-	-	1	5	5	4	4	-	21
Meningococcal infection ..	-	1	-	-	1	-	-	-	-	-	-	1	3
Opthalmia neonatorum ..	-	-	-	-	1	-	-	-	-	-	-	-	1
Pemphigus neonatorum ..	-	-	-	-	-	1	-	-	-	-	-	-	1
Pneumonia	7	7	1	4	3	2	1	2	-	1	2	2	32
Puerperal pyrexia	-	5	1	5	3	4	3	5	7	6	7	1	47
Relapsing fever	-	-	-	-	-	-	-	-	-	-	-	-	-
Scarlet fever	7	11	12	4	11	2	7	3	7	7	2	7	80
Smallpox	-	-	-	-	-	-	-	-	-	-	-	-	-
Typhoid and paratyphoid fevers	-	-	-	-	-	-	-	-	-	-	-	-	-
Typhus fever	-	-	-	-	-	-	-	-	-	-	-	-	-
Whooping cough	6	1	3	3	6	11	15	30	13	2	1	2	93
Tuberculosis: respiratory, males	-	12	6	7	3	1	3	2	1	1	4	-	40
females ..	-	5	-	1	2	3	2	1	1	-	3	1	19
other forms, males	-	-	1	-	-	-	-	-	1	-	-	-	2
females ..	1	3	-	-	-	-	-	-	-	-	-	-	4
Food poisoning	1	-	-	1	35	1	6	-	3	1	-	-	48
Totals	22	47	30	31	75	29	176	55	41	27	23	15	571

During the year 84 cases of infectious disease were notified from or removed to hospitals in the district, and the following table gives the distribution :

Disease	Infectious Diseases Hospitals			Other Hospitals			Total
	Lodge Moor Sheffield	Doncaster Isolation Hospital	Kendray Hospital, Barnsley	Moorgate General Hospital	Rotherham Hospital	Other Hospitals	
Dysentery	9	-	1	2	-	-	12
Erysipelas	1	-	-	-	-	-	1
Measles	1	-	-	-	-	-	1
Meningococcal infection	1	-	1	1	-	-	3
Pemphigus neonatorum	-	-	-	1	-	-	1
Pneumonia	-	-	-	2	2	-	4
Puerperal Pyrexia	-	-	-	46	-	-	46
Scarlet fever	11	1	-	-	-	-	12
Whooping cough	3	-	-	1	-	-	4
Totals	26	1	2	53	2	-	84

In addition to these cases, 26 patients were admitted to Lodge Moor Hospital, Sheffield, for observation and were ultimately diagnosed as follows :

Admitted for observation for	Final diagnosis										Total
	Broncho- pneumonia	Cardiac disease	Colitis	Cor pulmonale	Enteritis	Glandular fever	Migraine	Tonsillitis	Vaccinia	Nil	
Acute poliomyelitis	-	-	-	-	-	-	-	-	-	1	1
Bronchitis	-	-	-	1	-	-	-	-	-	-	1
Diphtheria	-	-	-	-	-	3	-	-	-	-	3
Dysentery	-	-	1	-	-	-	-	-	-	-	1
Enteritis	-	-	-	-	8	-	-	-	-	2	10
Meningitis	1	-	-	-	-	-	1	-	1	-	3
Para-typhoid fever	-	-	-	-	1	-	-	-	-	-	1
Pneumonia	2	1	-	-	-	-	-	-	-	-	3
Pyrexia of unknown origin	-	-	-	-	-	-	-	-	-	1	1
Tonsillitis	-	-	-	-	-	1	-	1	-	-	2
Totals	3	1	1	9	1	4	1	1	1	4	26

In amplification of the foregoing tables the following observations are made on the number of notifiable diseases.

No case of acute poliomyelitis was notified, and one patient was admitted to hospital for observation for this disease but the diagnosis was not confirmed.

No case of diphtheria was notified during the year. Three patients were admitted to hospital for observation but were diagnosed as suffering from glandular fever. The last notified case occurred in 1952.

Of the 174 cases of dysentery notified, 12 were treated in hospital and in another case the diagnosis was not confirmed.

Six cases of erysipelas were reported, all of whom except one, were treated at home.

Twenty-one cases of measles were reported during the year, one of whom was treated in hospital. No deaths occurred from this disease.

Three notifications of meningococcal infection were received and removed to hospital for treatment. Three other patients were admitted for observation but were diagnosed as not suffering from this infection.

Ninety-three cases of whooping cough were notified, four of whom were removed to hospital for treatment. No deaths occurred.

Forty-seven notifications of puerperal pyrexia were received, all of which with one exception were reported from hospital.

One case each of ophthalmia neonatorum and pemphigus neonatorum were notified during the year.

Of the 80 notifications of scarlet fever received, 12 cases were treated in hospital and 68 remained at home. No deaths occurred.

Forty-eight notifications of food poisoning were received during the year, and all were treated at home. One major outbreak affecting 36 persons was reported following a children's party and a church bazaar and was due to bacillus salmonella typhimurium which was confirmed in 26 of these cases. Reference to this outbreak and the action taken will be found in the section of this report dealing with the sanitary circumstances of the Borough. The remaining 12 cases reported were single outbreaks and in each case the cause was unknown.

TUBERCULOSIS

NEW CASES AND MORTALITY DURING 1956

NOTIFICATION AND DEATHS.—The following table gives details of the number of primary notifications received during the year :

Pulmonary		Non-pulmonary		Total
Males	Females	Males	Females	
40	19	2	4	65

In addition, the following cases were brought to notice other than by formal notification :

	Pulmonary	Non-pulmonary
Death returns from local registrars ...	1	1
Transferable deaths from Registrar General ...	—	—
Posthumous notifications ...	—	—

Particulars of new cases of tuberculosis and of deaths from the disease are given in the following table :

Age periods Years		New cases*				Deaths			
		Pulmonary		Non-pulmonary		Pulmonary		Non-pulmonary	
		M.	F.	M.	F.	M.	F.	M.	F.
Under 1	..	1	—	—	—	—	—	—	—
1-2	..	—	—	—	—	—	—	—	—
2-5	..	1	—	—	—	—	—	—	—
5-10	..	—	—	—	2	—	—	—	—
10-15	..	—	—	—	—	—	—	—	—
15-20	..	3	—	1	—	—	—	—	—
20-25	..	2	7	—	—	—	—	—	—
25-35	..	6	7	—	—	—	—	—	—
35-45	..	8	2	1	2	—	—	—	1
45-55	..	5	3	—	—	2	—	1	—
55-65	..	10	—	1	—	3	—	1	—
65-75	..	5	—	—	—	3	—	—	—
75 and upwards	..	—	—	—	—	—	—	—	—
Totals	..	41	19	3	4	8	—	2	1

* Primary notifications, including other new cases which have come to the knowledge of the Medical Officer of Health during the year.

A review of the deaths which occurred during 1956 amongst notified cases of tuberculosis shows the following periods elapsed between notification and death :

Notification	Pulmonary	Non-pulmonary
After death	—	—
Within one month	1	—
1—3 months	1	—
4—6 months	—	—
7—12 months	1	1
1—2 years	—	—
2—3 years	2	—
3—4 years	1	—
4—5 years	—	—
Over 5 years	1	1
From death returns	1	1
Total number of deaths from tuberculosis	8	3
Causes other than tuberculosis	3	—

The ratio of non-notified tuberculous deaths to the total tuberculous deaths was 1 in 5. No action was required for cases of wilful neglect or refusal to notify.

PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS) REGULATIONS, 1925.—There was no occasion to take action under the above Regulations relating to tuberculous employees in the milk trade.

PUBLIC HEALTH ACT, 1936 : SECTION 172.—No action was taken under this Section dealing with the compulsory removal of cases of tuberculosis to hospital.

MASS RADIOGRAPHY SURVEY

The Sheffield Mass Radiography Unit conducted its fourth survey in Rotherham from 24th April to 28th May, 1956. Once again, by courtesy of the Yorkshire Electricity Board, the Unit was operated in the Canteen at the Rotherham Power Station in Rawmarsh Road.

There was a decrease in the total attendances—7,671 as compared with 8,178 in 1955. This was most marked in the public sessions, whilst on the other hand, there was an increase in the number of organised groups and school children. It is possible that quite a number of men who would otherwise have attended the public sessions had already been x-rayed at one of the large steel works in the town only a few weeks before.

The following table summarises the attendances during 1956 and the previous years when the Unit has visited the town :

Attendances for :	1952	1953	1955	1956
Miniature films—Public sessions ...	3481	2392	5194	3892
School children ...	1447	1429	1523	2092
Organised groups ...	2007	1240	1461	1687
	—	—	—	—
Total attendances for miniature films	6935	5061	8178	7671
	—	—	—	—

The following table summarises the attendances at the public sessions and organised groups of school children and workers in offices, shops and factories :

	Males	Females	Total
General Public	1719	2173	3892
School children	1094	998	2092
Organised groups from factories, shops and offices. etc.	697	990	1687
	—	—	—
Total miniature films	3510	4161	7671
	—	—	—

Of the 7,671 persons attending, 403 were recalled for re-examination by large film. Of these 204 were males and 199 females. Seven males and 6 females were re-called for a clinical interview with the Medical Director.

The following table gives details of the persons who were referred to their own doctor, or the Chest Clinic or to hospital, etc. :

	Males	Females	Total
Own doctor	59	30	89
Rotherham Chest Clinic	22	25	47
General Hospital for further investigation ...	4	1	5
Re-check in 3-6 months	2	4	6
	—	—	—
	87	60	147
	—	—	—

The provisional diagnoses of the persons referred to the Chest Clinic were as follows :

					Males	Females	Total
Active tuberculosis	...	...	...	...	4	7	11
Inactive tuberculosis	...	...	...	...	8	10	18
Pneumoconiosis	...	...	...	...	3	—	3
Suspected neoplasm	...	...	...	...	3	—	3
Other non-tuberculous conditions			...	...	4	8	12
					—	—	—
					22	25	47
					—	—	—

Details of other conditions discovered during the survey are given in the following table :

					Males	Females	Total
Old inactive tuberculosis	...	...	...	...	8	6	14
Recent inflammatory condition			...	...	1	2	3
Bronchitis and emphysema	...	...	...	...	29	10	39
Pneumoconiosis	...	...	...	...	10	—	10
Pleural thickening	...	...	...	...	3	—	3
Cardiac abnormalities	...	...	...	...	6	7	13
Bronchiectasis	...	...	...	...	6	3	9
Referred to General Hospital to exclude neoplasm					1	—	1
					—	—	—
					64	28	92
					—	—	—

Some of the above were referred to their own doctor for further action, the others being classified for record purposes.

CARE OF MOTHERS AND YOUNG CHILDREN

CHILD WELFARE CENTRES

The attendance at Redscope Child Welfare Centre has increased and the premises were found to be inadequate for the number of persons attending. It has been necessary to increase the sessions to meet the need and the clinic is now open every Wednesday, all day, with a doctor in attendance at the morning session.

Similarly the attendance at Broom Valley Clinic Welfare Centre has also increased and many persons have left the premises without attention. The premises are small and inadequate for the number of persons attending and negotiations are in progress to secure additional accommodation in the vicinity to meet the public need.

Although the Redscope and Broom Valley Clinics are dealing with the new areas there has not been an appreciable fall in attendance at other clinics. There has been a total increase on the 1955 figures of 335 children attending and 244 attendances made.

The following table shows the usage of the clinics :

Centre	Sessions held	New registrations			Total children attending			Total attendances			Medical consultations		
		Un. 1 yr.	1-2 yrs.	2-5 yrs.	Un. 1 yr.	1-2 yrs.	2-5 yrs.	Un. 1 yr.	1-2 yrs.	2-5 yrs.	Un. 1 yr.	1-2 yrs.	2-5 yrs.
Ferham House ..	101	250	15	30	347	124	210	2170	580	395	793	285	308
Cranworth Road ..	101	254	32	29	360	148	197	1903	444	343	623	233	230
Thorpe ..	48	47	1	—	72	14	27	603	98	45	139	31	32
Greasbrough ..	40	40	2	3	68	24	41	401	122	96	148	48	32
Canklow ..	48	93	15	8	143	50	81	791	192	153	354	84	87
Blackburn ..	51	40	3	4	55	17	44	374	84	100	139	30	45
High Greave ..	52	70	12	3	113	48	53	670	166	115	249	74	43
Broom Valley ..	49	143	37	16	180	81	144	1102	269	248	420	144	184
Redscope ..	65	120	17	14	178	49	94	1035	172	141	530	131	131
Totals ..	555	1057	134	107	1516	555	891	9049	2127	1636	3395	1060	1092

In all, 2,962 children made 12,812 attendances during 1956 as compared with 2,627 children making 10,371 attendances during 1955.

In addition to the child welfare clinics the following pre-school children were referred during 1956 to the specialist and other treatment clinics held on centre premises :

					Cases	Total Inspections
Orthopaedic	...	...	...	...	35	74
Orthopaedic treatment	...	...	...	...	—	—
Aural	...	...	...	...	44	110
Aural treatment	...	...	...	...	30	133
Ophthalmic	...	...	...	...	36	236
Chiropody	...	...	...	...	3	3
Dental	...	...	...	...	334	416
Minor ailment treatment	...	...	...	...	49	159

At the ophthalmic clinic 36 children under 5 years of age were submitted for refraction. In 31 cases glasses were prescribed. 200 re-inspections of children in this age group were also made during the year.

DENTAL TREATMENT

The treatment given to expectant and nursing mothers and to children under school age at the Local Authority Clinics in Rotherham during 1956 is detailed in the appended tables. The work done shows increases on similar activities for 1955, and this may be deemed creditable although the following points should be borne in mind, that this treatment may be obtained free from a private dentist (apart from the provision of any dentures) and it is likely that a patient who regularly attends her own dentist will continue to do so for conservation treatment. In an industrial area such as Rotherham, there are many women who, finding that they have to pay up to £4 5s. 0d. for dentures obtained from a private dentist even though they are in the “priority class” of an expectant or nursing mother, will decide that they will attend the clinic for their artificial teeth. Several cases have occurred where a private practitioner has extracted the teeth and the patient has realised later that she is entitled to attend the Local Authority Clinic for such free dentures, and then has to terminate her treatment with her first dentist in order to receive attention at the clinic. This is a very unsatisfactory state of affairs, but due to the kind co-operation and goodwill of the local dental practitioners, such cases of this nature which occurred, have been settled satisfactorily, at least to the patient. For all the increased cost would be to the National Health Service, one would think that all treatment including dentures could be provided free to expectant and nursing mothers attending their own dentist. The amount and standard of work done at the clinic is such that there is no need to offer a bribe—which is what in effect now prevails—to patients in order to get them to visit the local authority clinics. Apparently approximately 40 per cent. (390) of the expectant and nursing mothers in the Borough attended the clinic during 1956, and of these 148 were supplied with dentures, the exact nature of which is shown in one of the appended tables. To offset this increase in denture work (of 26 patients more in 1956 than in 1955) it is pleasant to point out that 210 fillings were done compared with 127 during 1955.

It is to be hoped that 1957 will see the appointment of a full time assistant technician. The totals of the work done for expectant and nursing mothers, pre-school and school children patients are again given here, since each given seperately in different reports may lead to an under-estimation of the total work done in the laboratory :

			1956	1955
Total full dentures made	...	...	118	104
Total part dentures made	...	...	191	179
Total repairs to dentures	...	...	19	26
Total crowns made	...	...	9	17
Total inlays cast	...	...	1	10
Total orthodontic appliances made	...		345	287
Total orthodontic appliances repaired			18	16

Fortunately the workshop is a large, airy room well supplied with benches and equipment in which several technicians could work in healthy and comfortable conditions.

The work done for the pre-school children continues at about the same level, being related both to the amount of caries developing and ultimately requiring treatment, and to the number of dentists available for giving treatment. Perhaps in the fullness of time it will be finally agreed that fluoridation of the water supplies, up to a level of 1 pint per million occurring naturally in some areas, is beneficial to the structure of teeth. Even if this only delays the attack of caries, the beneficial results of this in the milk dentition would be enormous, in that there would be fewer milk teeth extracted before the time at which they are normally lost, with a consequent decrease in the abnormal movements of the succeeding teeth and much orthodontic treatment now required during school age would be avoided. The effect of retaining a full milk dentition and so able to thoroughly chew food, would have a marked effect on the musculature and bony growth of the jaws, again reducing tendencies to irregularities of the teeth at a later age, and also, one imagines, on the child's digestion and from that its general growth and development.

The following table gives details of the treatment given at dental clinics to expectant and nursing mothers and young children during 1956 :

						Expectant Children and nursing under five mothers	Total 1956	Total 1955
Total attendances	..	..	..	..	..	416	1294	1710
Number of individuals treated	..	..	..	..	..	334	390	724
Extraction —permanent teeth	..	..	..	..	..	—	1264	1264
—temporary teeth	..	..	..	..	..	772	—	772
Fillings —permanent teeth	..	..	..	..	..	—	210	210
—temporary teeth	..	..	..	..	..	21	—	21
Anaesthetics—local	..	..	..	..	..	—	83	83
—general	..	..	..	..	..	348	248	596
Other operations	..	..	..	..	..	57	936	993
Number of patients supplied with dentures	..	..	..	..	..	—	148	148

Details of the denture work done for expectant and nursing mothers in 1956 was made up as follows :

								Dentures	Patients
Full upper and full lower dentures	..	..	..	..	..	..	..	116	58
Full upper or full lower dentures	..	..	..	..	..	..	..	10	10
Full upper or full lower denture along with part lower or part upper denture	..	..	..	..	..	..	..	40	20
Partial upper and partial lower dentures	..	..	..	..	..	..	..	34	17
Partial upper or partial lower dentures carrying									
4 teeth or less	..	..	..	..	..	..	..	32	32
5—8 teeth	..	..	..	..	..	..	..	9	9
over 8 teeth	..	..	..	..	..	..	..	2	2
Total								243	148

In addition to the above, 5 dentures were repaired and 8 dentures re-lined.

CARE OF THE PREMATURE INFANT

All infants weighing 5½ lbs. or less at birth are regarded as premature babies irrespective of the period of gestation.

The following table gives details of the premature births during the year :

				Total births	Premature births	Percentage
Live births	..	..	..	1405	95	6.76
Still births	..	..	..	31	17	54.84
Total				1436	112	7.80

Of the 112 premature births, 47 live births and 13 still births occurred in hospital; 47 live births occurred at home of which 7 were transferred to hospital, and 3 still births also occurred in cases delivered at home ; whilst 1 live birth and 1 still birth occurred in cases delivered in nursing homes.

Details of the birth weights of these babies are given in the following table which also gives the numbers who died within 24 hours of birth and those surviving at the end of 28 days :

Weight at birth	PREMATURE LIVE BIRTHS															PREMATURE STILL- BIRTHS		
	Born in hospital			Born at home and nursed entirely at home			Born at home and transferred to hospital on or before 28th day			Born in nursing home and nursed entirely there			Born in nursing home and trans- ferred to hospital on or before the 28th day			Born in hospital	Born at home	Born in nursing home
	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days			
3 lb. 4 oz. or less (1,500 gms. or less)	8	7	1	-	-	-	1	1	-	-	-	-	-	-	-	7	-	-
Over 3lb. 4oz. up to and including 4lb. 6oz. (1,500—2,000 gms.)	6	-	6	2	1	1	1	1	-	-	-	-	-	-	-	3	2	-
Over 4lb. 6oz. up to and including 4lb. 15oz. (2,000—2,250 gms.)	11	1	10	5	-	5	3	1	2	-	-	-	-	-	-	2	1	-
Over 4lb. 15oz. up to and including 5lb. 8oz. (2,250—2,500 gms.)	22	1	19	33	1	31	2	-	1	1	-	1	-	-	-	1	-	1
Totals	47	9	36	40	2	37	7	3	3	1	-	1	-	-	-	13	3	1

The Premature Baby Nurse visited 79 premature babies during the year, and of these one baby died, having been re-admitted to hospital after the nurse's first visit because of the child's poor condition. The cause of death was, "congenital malformation of the alimentary tract and mongolism." Two other babies were admitted to hospital after medical aid was called, but both were eventually adjusted satisfactorily.

Details of the babies cared for during 1956 were as follows :

	Weakly babies		Total
	Premature babies	other than premature	
In care at the beginning of the year ..	10	4	14
New cases, 1956	77	46	123
Total infants	87	50	137
Infants discharged from care as :—			
adjusted	79	50	129
died	1	-	1
admitted to hospital	-	-	-
Infants remaining in care at end of the year	7	-	7
Total infants	87	50	137
Visits paid	1223	360	1583

The number of premature babies who were wholly or partly breast-fed at the age of one month was 35.

The number of children who attended the Paediatric Clinics for follow-up and haemoglobin estimation was 49. It was decided this year, that the premature babies should only attend to see the Paediatrician at 6 months of age, as routine, and afterwards as necessary, instead of attending at six months, one year and two years.

Thirty-four babies other than prematures were attended during the year and were adjusted satisfactorily.

It will be seen from the following table that during 1956 there were fewer premature babies born in Rotherham than at any time during the last five years :

				1952	1953	1954	1955	1956
Total live births .. .. .	..	..	..	1336	1325	1326	1320	1405
Premature live births .. .. .	..	..	..	117	123	117	113	95
Percentage .. .. .	..	..	..	8.76	9.28	8.82	8.56	6.76
Total still births .. .. .	..	..	..	35	29	37	35	31
Premature still births .. .. .	..	..	..	14	16	15	15	17
Percentage .. .. .	..	..	..	40.00	55.17	40.57	42.86	54.84
Total live and still births .. .. .	..	..	..	1371	1354	1363	1355	1436
Premature live and still births .. .. .	..	..	..	131	139	132	128	112
Percentage .. .. .	..	..	..	9.55	10.27	9.68	9.45	7.80

It is also interesting to note that numerically there was the largest number of births during any of the five years under review and the smallest number of premature live births together with the highest number of premature still births.

Whilst under our present state of knowledge everything is being done to save the lives of these small delicate babies—full details were given in the 1954 report of the work of the Premature Baby Nurse—it is still a matter of deep concern when reviewing the causes of infant deaths to find that of the 34 deaths registered under one year of age no less than 14 babies died under 24 hours old, 5 at one day old, 1 at two days old and another at 3 days old. Full details of the ages at and causes of death will be found in the table on infantile mortality in the vital statistics section of this report.

Of the 34 deaths under 1 year of age, 17 of these were premature babies, of whom :

- One weighed less than 1 lb. at birth
- Two weighed less than 2 lbs. at birth
- Four weighed less than 3 lbs. at birth
- Two weighed less than 4 lbs. at birth
- Three weighed less than 5 lbs. at birth
- Two weighed less than 5½ lbs. at birth, and
- Three weighed 5½ lbs. at birth

The remaining 17 infantile deaths, other than those premature babies, included 5 from pneumonia, 4 from congenital malformations, 4 from atelectasis and 2 each from accidents and other causes. The two accidental deaths were due to asphyxia—one being due to inhalation of milk, the child having been left to feed itself and the other was due to smothering when sleeping in its parents' bed.

Special enquiries are made into all infantile deaths in order that the resultant cumulative experience may provide some means of prevention.

A graph showing the reduction in the infantile mortality rate since the beginning of the present century is one of the special inset features of this report. The several milestones depicted thereon shows how the preventable proportion of the rate—those deaths over 4 weeks of age have been reduced. These still leave the “hard core”—the neo-natal deaths on which all our future efforts should be concentrated. The reduction in this group of deaths under four weeks of age is not so striking and include prematurity and congenital weakness, birth injuries and congenital malformation. No effective further reduction will be made in this rate until the factors causing prematurity and congenital weakness are fully known, and it is to this end that efforts in the future should be concentrated.

CHILDREN’S COMMITTEE — RESIDENTIAL NURSERY AND CHILDREN’S HOMES

Medical inspections have been held monthly at the Nursery and all children were examined on admission and discharge.

Number of children immunised	...	...	...	...	16
Number of children vaccinated	...	...	...	...	13
Number of medical examinations	...	...	...	...	506
Number of visits made by medical officers	...	...	...	...	64
Number of visits made by health visitors	...	...	...	...	12

WELFARE COMMITTEE — TEMPORARY ACCOMMODATION

During the year two families were rehoused from temporary accommodation and one family still requires close supervision. There are now eight families in temporary accommodation, 16 adults and 26 children. Frequent visiting is essential and the mothers are encouraged to attend the child welfare centre with their children. 121 visits were made by the health visitors in 1956.

SALE OF WELFARE FOODS

The following table gives details of the sales of Welfare Foods in the County Borough since taking over the scheme in June, 1954 :

				1954	1955	1956
National dried milk	...	...	...	34516	59492	61814
Cod liver oil	...	...	...	6924	11621	11632
A and D tablets	...	...	...	2756	5866	6619
Orange juice	...	...	...	31996	66635	84049
				<hr/>	<hr/>	<hr/>
				76192	143614	164114
				<hr/>	<hr/>	<hr/>

One of the main reasons for the increased sales is due to the change in the system whereby cash can now be paid instead of having to provide the same amount of money in stamps.

MATERNITY SERVICES AND THE DOMICILIARY MIDWIVES SERVICE

MATERNITY SERVICES

During the year special visits were paid to 235 mothers who had made application for their confinement to take place in hospital. Of these, 170 were recommended for hospital admission. The remaining 65 persons had suitable accommodation and were able to be nursed at home. There was some difficulty experienced in accommodating the mothers during certain months, due to the maternity bookings being heavier than usual, and the beds had already been allocated before the requests for home visits to assess the suitability of the home for confinement were received in the department. There was an increase of 71 applications on the 1955 figure for hospital confinements.

Confinements among normal residents in the Borough :

A. SERVICES PROVIDED WITHIN THE BOROUGH :—		1952	1953	1954	1955	1956
Moorgate General Hospital .. ..	..	412	380	332	366	339
Rotherham General Hospital .. ..	..	1	—	1	—	1
Private nursing homes .. ..	..	34	42	54	62	59
Domiciliary confinements .. ..	..	705	662	741	656	717
B. SERVICES PROVIDED OUTSIDE THE BOROUGH :—		1952	1953	1954	1955	1956
The Jessop Hospital, Sheffield ..	..	14	20	12	18	17
Listerdale Maternity Home .. ..	..	188	216	209	220	249
Hallamshire Maternity Home .. ..	..	13	11	9	9	15
Private nursing homes and other Institutions .. ..	..	1	9	2	1	8
Domiciliary confinements .. ..	..	4	2	3	5	12
Total confinements		1372	1342	1363	1337	1417

Owing to the prominence given to the arrangements for these services by the central government, a review of the facilities available in Rotherham has been undertaken and several interesting trends were found.

In order to get a picture of the maternity work undertaken in the County Borough, the confinements which have occurred amongst the ordinary residents are given in the following table :

Year	Confinements occurring in						Total
	Hospitals Maternity Homes		Private Maternity Homes		Domiciliary arrangements		
	Number	Per cent	Number	Per Cent	Number	Per Cent	
1946	641	36·21	331	18·70	798	45·09	1770
1947	764	39·98	288	15·07	859	44·95	1911
1948	755	46·49	154	9·48	715	44·03	1624
1949	647	41·99	125	8·11	769	49·90	1541
1950	638	43·85	90	6·19	727	49·96	1455
1951	680	47·19	49	3·40	712	49·41	1441
1952	628	45·77	35	2·55	709	51·68	1372
1953	627	46·72	51	3·80	664	49·48	1342
1954	563	41·31	56	4·11	744	54·58	1363
1955	613	45·85	63	4·71	661	49·44	1337
1956	621	43·82	67	4·73	729	51·45	1417

In the above table, statistics are given for the two years prior to the coming into operation of the National Health Service Act, 1946, on 5th July, 1948. Shortly after the "appointed day" there was a decline in the admission of Rotherham maternity patients into the Moorgate General Hospital, Rotherham, which was counterbalanced by an increase of Rotherham women admitted into the Listerdale and the Hallamshire Maternity Homes. These are situated in the surrounding area of the West Riding County Council, and all are under the control of the Rotherham and Mexborough Hospital Management Committee. There were three private maternity homes in the County Borough, one of which closed down in 1948, and another home closed in 1950, leaving one private nursing and maternity home still functioning in 1956.

From the above statistics it will be seen that institutional and domiciliary midwifery have shared the maternity work of the County Borough on approximately a 50 per cent. basis to each service.

There is no doubt that the chief reason for this constant proportion has been the co-operation which has obtained between the hospital authorities and the local authority which is based on the practice adopted for social priorities for admission of maternity patients. These institutions serve a much wider area than the County Borough and in order that the maternity accommodation may be utilised to the best advantage, recommendations for hospital or maternity home confinements on social grounds are made by the Medical Officer of Health following a report on the home circumstances by the area health visitor.

In order to appreciate the effect of the working of the National Health Service Act 1946, the statistics from 1950 onwards, when it can be assumed that the Health Services provided under the Act had settled down, have been used for this survey.

The following statement gives the number of applications for hospital confinement investigated by the health visitors and appropriate recommendations made :

	1950	1951	1952	1953	1954	1955	1956
Total number of Rotherham patients confined in Hospital maternity home	638	680	628	627	563	613	621
Priority applications reported upon ..	293	357	316	322	226	162	214

Reviewing the domiciliary midwifery services of the County Borough during the same period, which are provided by the Maternity Services Scheme of the Executive Council and the Domiciliary Midwives Scheme of the County Borough Council, the following table gives details of the bookings of patients confined and includes the few non residents who had their confinement in the County Borough :

Year	Doctor NOT booked for confinement		Doctor booked for confinement		Total
	Number	Per cent.	Number	Per cent.	
1950	455	61·74	282	38·26	737
1951	379	53·23	333	46·77	712
1952	328	46·20	382	53·80	710
1953	281	42·26	384	57·74	665
1954	296	39·26	458	60·74	754
1955	245	36·68	423	63·32	668
1956	215	28·94	528	71·06	743

The delivery of those patients who had booked a doctor to take charge of their confinement is given in the following table, together with the relevant percentages :

Year	Doctor PRESENT at birth		Doctor ABSENT at birth		Total doctor's bookings
	Number	Per cent	Number	Per cent	
1950	143	50·71	139	49·29	282
1951	144	43·24	189	56·76	333
1952	191	50·00	191	50·00	282
1953	179	46·61	205	53·39	384
1954	176	38·43	282	61·57	458
1955	150	35·46	273	64·54	423
1956	200	37·88	328	62·12	528

Adding those cases in which the doctor was booked but was absent at birth to those cases in which the midwife only was booked, and deducting the cases in which she had to call medical aid, the deliveries were as follows :

Year	Patients delivered by doctors		Patients delivered by midwives		Total domiciliary deliveries
	Number	Per cent	Number	Per cent	
1950	143	19·40	594	80·60	737
1951	144	20·22	568	79·78	712
1952	191	26·90	519	73·10	710
1953	184	27·67	481	72·33	665
1954	185	24·54	569	75·46	754
1955	164	24·55	504	75·45	668
1956	208	27·99	535	72·01	743

To sum up the changes which the last three tables indicate, it will be seen that whereas in 1950 only 38.26 per cent. of the women confined at home booked their confinement with a doctor, during the subsequent years, this has progressively increased until in 1956 the percentage has increased to 71.06. The cases booking midwife only, shows the reverse by decreasing from 61.74 per cent. in 1950 to 28.94 per cent. in 1956.

During the same period, however, the actual numbers of cases in which the doctor has been present at the birth of their booked cases have only increased from 143 in 1950 to 200 in 1956 although their bookings increased from 282 to 528 in those same years. In the appendix will be found graphs expressing these figures as percentages of the total domiciliary confinements.

The effect of the increased bookings by doctors upon the work of the District Ante-natal Clinics is reflected in the decrease in the numbers of women attending and in the total attendances made :

					1950	1951	1952	1953	1954	1955	1956
					—	—	—	—	—	—	—
Women attending	..	..	..	..	578	578	532	493	467	379	339
Attendances	..	..	..	..	1002	934	848	737	774	659	602

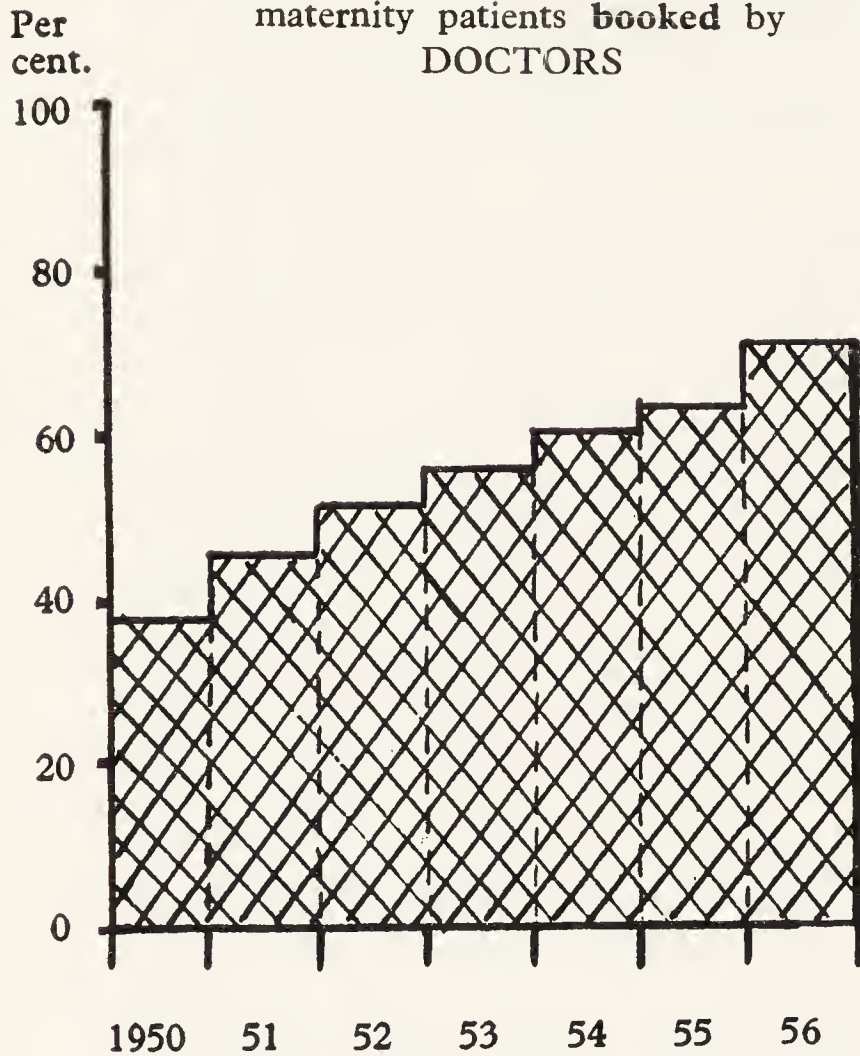
and a similar decrease in attendances at clinics attended by district midwives is also recorded :

					1950	1951	1952	1953	1954	1955	1956
					—	—	—	—	—	—	—
Attendances	..	..	..	..	3173	3024	3078	3045	3003	2558	2661

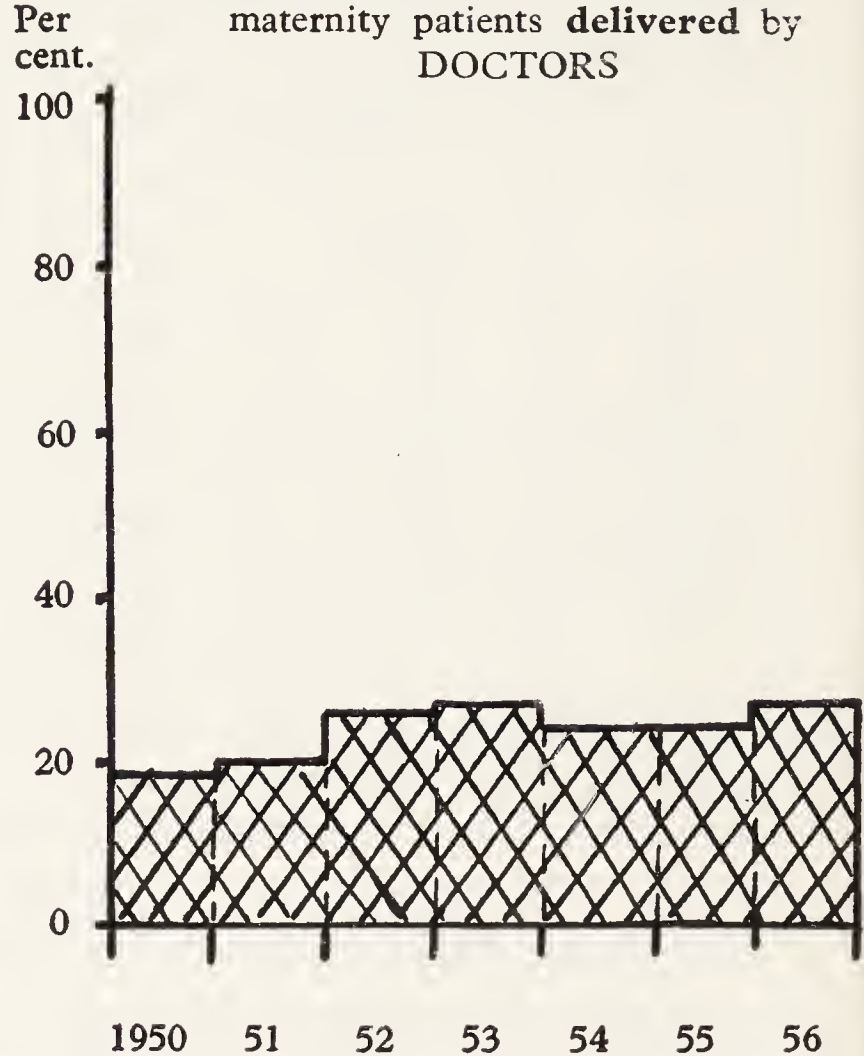
The midwives refer all their booked cases to the district ante-natal clinics which are attended by a consultant obstetrician (Mr. D. Ballantine) who acts as the Corporation's Obstetric Officer. Reports of his examination are sent to the patient's own doctor and sometimes result in the cases being booked by the doctor. Midwives hold sessions at the clinics at which their own booked cases and cases booked by a doctor attend with the doctor's permission.

MATERNITY SERVICES, 1950-1956

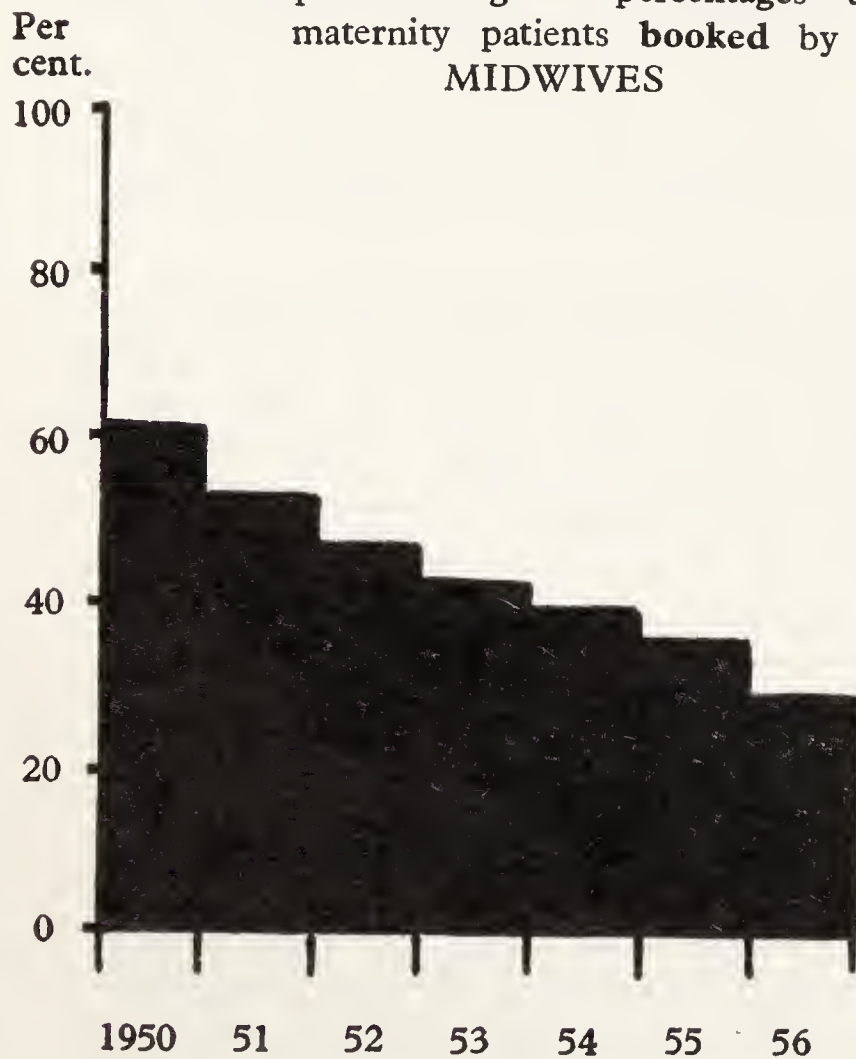
Graph showing as percentages the
maternity patients **booked** by
DOCTORS



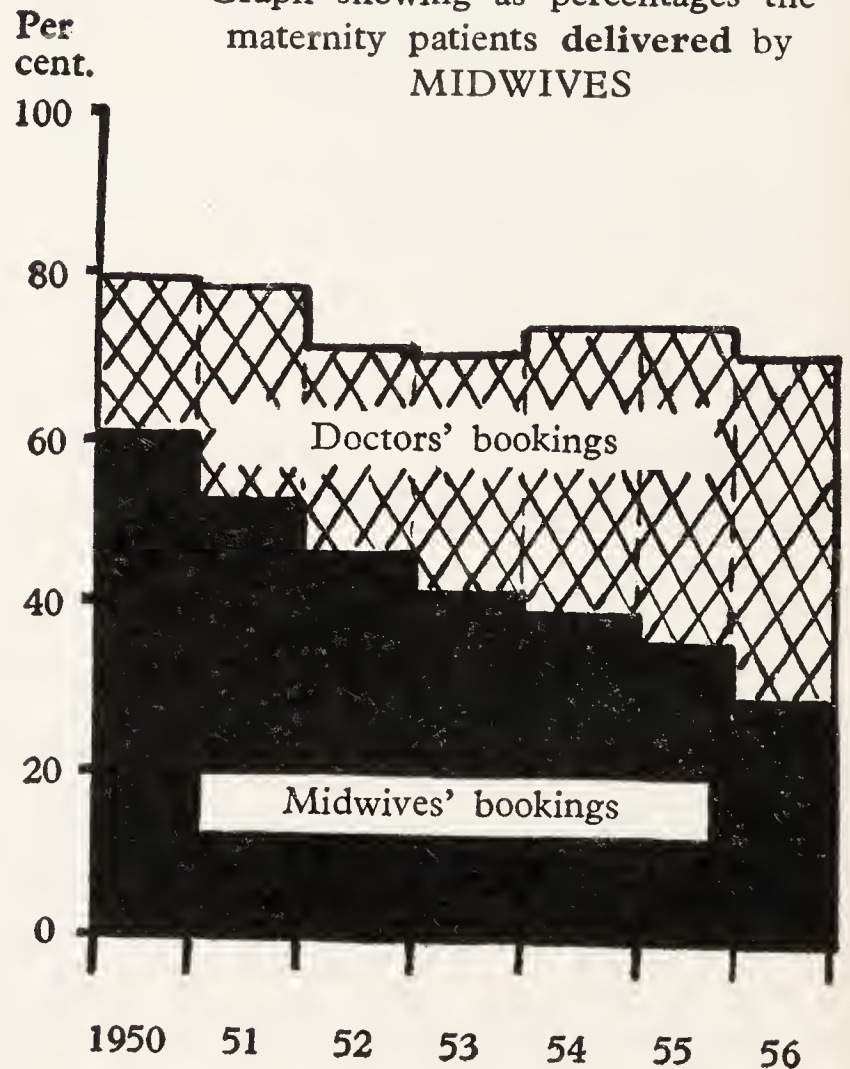
Graph showing as percentages the
maternity patients **delivered** by
DOCTORS



Graph showing as percentages the
maternity patients **booked** by
MIDWIVES



Graph showing as percentages the
maternity patients **delivered** by
MIDWIVES



The ante-natal care provided by the Local Health Authority includes the consultant's medical examinations and the examinations by the midwife together with tests for blood group and for haemoglobin, routine dental examination and treatment and chest X-ray. Relaxation classes and mothercraft talks are given to all ante-natal patients whether booking at hospital or by doctor or midwife. In order to further co-operation between the general practitioners of the town and the Corporation's services, a circular was sent in May, 1956, to all doctors on the maternity lists. This followed a discussion of the proposals with the Local Medical Committee and extended any of the Corporation's facilities to them and their booked cases. This offer was to operate both ways in that the doctor could attend at the Corporation clinics to see his patients or that the midwife would attend at the doctor's surgery. It was realised that to meet the needs of both sides, as each have their own daily work to perform, such appointments must be flexible and due notice arranged. The suggested arrangement therefore was for the doctor to send or telephone to the Medical Officer of Health giving an indication of his possible convenience and that every endeavour would be made to meet their wishes. However, so far no requests have been made for these facilities.

A further obligation which the Domiciliary Midwives Service has undertaken in recent years is the nursing care of hospital maternity cases who have been discharged home before the fourteenth day. The following table gives details since the recording of these cases commenced in 1952 :

	1952	1953	1954	1955	1956
Total (County Borough) hospital confinements	628	627	563	613	621
Hospital discharges before the 14th day ...	207	365	319	316	337
Percentage	33.0	58.2	56.6	51.5	54.3

This rise in the number of patients discharged from hospital before the fourteenth day from 33 per cent. in 1952 to over 50 per cent. in the following years is a partially hidden factor resulting in further responsibility for the Local Health Authority's Midwifery Services.

Patients who were booked and delivered by midwives were encouraged to attend for examination at the post-natal clinic held jointly with the district ante-natal clinic, and the details of midwives cases delivered, and cases attending and attendances at the post-natal clinic, are as follows :

Year	Midwives bookings delivered	Midwives cases attended post-natal clinic		Post-natal attendances
		Number	Per cent	
1950	455	217	47.7	252
1951	379	204	53.8	242
1952	328	161	49.4	190
1953	281	115	40.9	130
1954	296	118	39.9	142
1955	245	112	45.7	127
1956	215	84	39.1	93

Domestic help is provided to maternity cases under the Act and the following table summarises the assistance rendered by the Home Help Service during the years 1950-1956 :

Year	Number of domiciliary confinements	Maternity cases served by Home Helps		Hours of service rendered	Average hours per case
		Number	Per cent		
1950	727	142	19·5	14,840	104·5
1951	712	214	30·6	19,310	90·2
1952	709	157	22·1	14,706	93·7
1953	664	145	21·8	14,459	99·7
1954	744	175	23·5	16,088	91·9
1955	661	161	25·1	14,891	92·5
1956	729	152	20·8	14,942	98·3

The domestic assistance given by relatives during the lying-in period should not be overlooked and many cases receive help from this source. The services of the home help during the ante and post-natal periods which are provided on medical certificate, are included in the above figures.

EXPECTANT AND NURSING MOTHERS

Due to the increase in attendances at the Mothercraft and Relaxation classes it was found necessary to include an additional session at Cranworth Child Welfare Centre. 241 mothers attended, making 1,695 attendances, as compared with 141 mothers attending and making 794 attendances in 1955. Talks, demonstrations, and films were shown. The mothers are recommended to attend by their own doctors, by midwives and health visitors and from the hospital and local authority ante-natal clinics.

DISTRICT ANTE-NATAL AND POST-NATAL CLINICS

The following table gives details of the attendances at the consultant ante-natal clinics during 1956 :

Clinics	Sessions held	New cases			Total women attending			Total attendances		
		A.N.	P.N.	B.C.	A.N.	P.N.	B.C.	A.N.	P.N.	B.C.
Ferham House	24	124	32	—	144	32	—	230	35	1
Cranworth Road	47	115	30	2	134	33	2	253	36	2
Greasbrough ..	10	9	6	—	15	6	—	29	6	—
Redscope	11	39	13	—	46	13	—	90	16	—
	—	—	—	—	—	—	—	—	—	—
Totals	92	287	81	2	339	84	2	602	93	3
	—	—	—	—	—	—	—	—	—	—

FAMILY PLANNING ASSOCIATION

A branch of the Family Planning Association was formed in Rotherham in February, 1956. This service now fills a need and has been of very considerable benefit to mothers of Rotherham.

The Health Committee granted to the Family Planning Association clinic facilities at Ferham House and gave them a financial grant of £50. Later in the year an agreement was drawn up whereby all new cases recommended by the Medical Officer of Health or the Consultant Obstetrician would be given free advice and treatment and the Corporation would pay the Family Planning Association £1 5s. 0d. for the initial treatment and 10/- for six-monthly visits.

DOMICILIARY MIDWIVES SERVICE

Two midwives commenced duties on 2nd January, 1956, Mrs. Elsie Hawley living at 47 Bents Road, Kimberworth Park Estate, and Mrs. Beatrice Ellis acting as relief midwife, living at Blackburn.

Mrs. H. M. Clarke reported sick on 22nd March, 1956, and was still off duty at the end of the year. In view of this, Mrs. B. Ellis was found a house at 290 Kimberworth Park Road, to assist Mrs. Hawley on this very busy area.

Mrs. W. Jones of Badsley Moor Lane, who was a holiday relief, resigned and left on 31st July, 1956. Her vacancy had not been filled at the end of the year.

The case load of the domiciliary midwives was maintained during the year as indicated below :

	1952	1953	1954	1955	1956
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
Domiciliary midwives	710	665	754	668	743

There were no private midwives practising in the County Borough during 1956.

Number of cases delivered in Institutions but attended by domiciliary midwives on discharge from Institutions and before the 14th day ..	207	365	319	316	337
Number of days service to such cases representing a similar saving of patient days in hospital	802	1506	1280	1474	1496

Of the 743 cases attended by midwives, 726 had booked their confinement with the service, 10 cases were delivered in emergency and 7 were miscarriages.

At the delivery of 207 midwives' cases, a doctor was present at the birth of the baby on 8 occasions, having been previously summoned by the midwife on medical aid. Of the 528 cases in which a doctor was booked the midwife delivered 328 of the patients, making a total of 545 cases delivered by midwives. Midwives acting in the capacity of maternity nurses attended 200 patients. 6 cases were handed over to the Home Nursing Service on account of infection or suspected infection in the mother or baby.

Analgesia was administered throughout the year by means of gas, air and pethidine. Fourteen sets of Minnitts apparatus are possessed by the service for the administration of gas and air analgesia, and four "Tecota" trilene machines for the administration of

trilene. Trilene has now been in use on certain midwifery districts and in view of their satisfactory performance and economy in use it has been decided to purchase a further six machines during the forthcoming year, so that trilene will be available to any district patient throughout the County Borough. All the sets are overhauled at regular intervals during the year ; Minnitts apparatus each quarter, and trilene apparatus at six-monthly intervals.

The following table gives details of the cases delivered during the year :

Cases delivered			Doctor not booked (Midwifery cases)		Doctor booked (Maternity cases)		Totals
			Doctor present at delivery	Doctor not present	Doctor present at delivery	Doctor not present	
Midwives booked cases	..	..	7	199	197	323	726
Emergencies	..	..	1	4	1	4	10
Miscarriages	..	..	—	4	2	1	7
			—	—	—	—	—
		Totals	8	207	200	328	743
			—	—	—	—	—

Analgesia—Number of cases who were delivered with:—

Gas and air only	..	..	1	46	32	62	141
Pethidine only	..	..	—	18	10	22	50
Trilene only	..	..	—	11	6	21	38
Gas/Air & Pethidine	..	..	4	75	88	133	300
Gas/Air & Trilene	..	..	—	—	4	4	8
Gas/Air, Pethidine and Trilene	..	..	—	1	4	2	7
Pethidine and Trilene	..	..	1	25	39	43	108
General Anaesthetic	..	..	—	—	2	—	2
Cases delivered without analgesia	..	..	2	31	15	41	89
			—	—	—	—	—
		Totals	8	207	200	328	743
			—	—	—	—	—

District midwives continue to give service to mothers discharged from local hospitals and maternity homes before the fourteenth day, of whom there were 337. A number of these cases were booked with the domiciliary service, but were admitted to hospital for medical reasons or in emergency, and returned home to the care of the midwife concerned, as soon as the emergency was over.

The four premature cots were borrowed on 27 occasions during the year. The annual inspection of midwives and of the nursing and maternity home, was carried out by Mr. D. Ballantine, Consultant Obstetrician and Medical Supervisor of Midwives, and he gave a satisfactory report on the service in all respects. The Flying Squad was called out once during the year, for a case of post partum haemorrhage and collapse of patient.

PUPIL MIDWIVES

There have been 7 pupil midwives taking their Part II training on the district and all 7 satisfied the examiners of the Central Midwives Board. On qualification, one pupil commenced her Queen’s training with the Home Nursing Service, two have taken district midwifery in Sheffield and the remainder are practising in hospitals.

POST-CERTIFICATE COURSES

Three midwives attended refresher courses during the year, Mrs. Houghton going to Leeds, Miss Ray to Sheffield and Mrs. G. Walsh to Cardiff.

MIDWIVES CLINICS

The number of attendances at the midwives ante-natal clinics held at centres during the year is as follows :

	Ferham House	Cranworth Road	Greas- brough	Redscope	Totals
No. of sessions held ..	238	241	49	59	587
No. of new cases attending	317	317	17	147	798
No. of cases attending from last year	126	73	12	28	239
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
Total attendances	1094	951	116	500	2661
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>

At all these sessions the educational facilities included advice on preparation for the forthcoming confinement and instructions on gas and air machines, trilene apparatus, and general health topics, in liaison with the health visitors at relaxation and mothercraft classes. The midwives attended the one-day course of lectures given by Dr. Grantley Dick Read to the midwifery, health visiting and nursing staff of the department on relaxation in childbirth. This was greatly appreciated. Owing to the low number of patients booking in the Greasbrough district, it was decided to reduce the number of ante-natal clinics to two monthly, instead of the weekly sessions as from 16th October, 1956.

On 15th November, 1956, a simple screening test for anaemia of expectant mothers was put into operation at all ante-natal clinics, in order to estimate the specific gravity of blood for haemoglobin content.

Arrangements were made for the chest X-ray of ante-natal patients at the Mass Radiography Centre in Sheffield. During the year, 132 patients have been examined. For one reason or another, medical or domestic, 35 mothers defaulted in their appointment and were all followed up. Of the total cases booked during 1956, one patient in every six had a chest X-ray. All cases except two were found to be clear. One patient had a chest lesion and was subsequently delivered on the district, but she and her family are still under the supervision of the Chest Physician. The other patient was discovered to have a heart condition and was subsequently delivered in hospital.

HEALTH VISITING

HEALTH VISITORS AND SCHOOL NURSES

Staff changes during the year were as follows :

Miss Bates, Mrs. Payling and Miss Brewer left the department. Two students who trained at Leeds University and one who trained at Battersea Polytechnic, London, were successful in their examinations and returned to the department in July and August respectively. Miss Keeton, Health Visitor, was appointed and commenced duties on 20th August, 1956.

There was no response to the advertisement for student health visitors in 1956.

INFANTS AND YOUNG CHILDREN

The block system of visiting which was resumed in September, 1955, continues to be in progress and is working satisfactorily. Children are visited at regular intervals. Children 0-1 year are visited eight times during the first year of life, children 1-2 years every 3 months and children 2-5 years at least three times during the year. Special reports have been submitted on children admitted to hospital at the request of the Paediatrician.

The case load for 1956 was :

Infants under 1 year on visiting list	...	...	...	1376
Infants 1—2 years on visiting list	...	...	...	1277
Infants 2—5 years on visiting list	...	...	...	3544
Tuberculous patients	...	...	...	436
Mental defectives	...	...	...	45
Diabetics	...	...	...	36
Gastrics	...	...	...	34
Chronic sick	...	...	...	37

SCHOOL NURSING

The school nurses have carried out the duties in connection with school work generally, with the help of clinic assistants and clinic nurses.

The case load for 1956 was as follows :

Number of school population	...	...	...	15382
Number of nursery schools	...	...	...	1
Number of schools with nursery classes	...	...	...	4
Number of voluntary schools	...	...	...	2
Number of primary schools	...	...	...	19
Number of secondary modern schools	...	...	...	4
Number of secondary technical schools	...	...	...	1
Number of County grammar schools	...	...	...	2
Number of special schools :				
Open air school	...	...	...	1
Educationally subnormal school junior and senior				1
			—	2

HEALTH EDUCATION

During this year, topics for display in the clinic show-cupboards have brought to the public eye some of the every-day methods of promoting a positive outlook on health.

Such displays have included : food values, general hygiene of the teeth, feet, and especially the care of the eyes in relation to viewing the television. Prevention of the spread of infection depicted barrier nursing as regards influenza and dysentery, also the danger of flies and other household pests.

During the danger times of holiday traffic, there was a special display of the Highway Code and Home Safety. In the autumn, the value of fresh air and adequate sleep was stressed, as well as preventive measures against smog.

All-the-year-round propaganda is displayed, promoting the value of immunisation and vaccination.

From 21st May to 28th May, 1956, a special feature "How to prevent accidents in the home," was produced in conjunction with the Rotherham Home Safety Committee. It was a full sized display in the showrooms of a local store. This was accompanied by a tape recording, calling attention to the public, both inside and outside the shop, to this subject.

MOTHER AND BABY CLUB

The Mother and Baby Club, which was introduced at the request of the young mothers in 1955 to follow on the Ante-natal Mothercraft Classes, has had a successful year. The club meets every Thursday afternoon at 2 p.m. at Cranworth Child Welfare Centre. There is a membership of 30 mothers. Special films and film strips have been shown and talks and demonstrations given. The mothers are very enthusiastic and the club appears to be serving a very useful purpose.

FATHER'S CLUB

There has been a gradual fall in attendance during the year due to shift working and domestic difficulties. The club has followed a similar programme as in the previous year. Talks, demonstrations and films have been shown. The film "Child birth without fear" by Dr. Grantly Dick Read was shown to members and their wives and there was an attendance of 85 persons on this occasion. The club will continue to meet at less frequent intervals and members will receive invitations to special sessions.

HANDICAPPED CHILDREN'S CLUB

The club has pursued its usual course to give physically handicapped children the benefit of a social gathering each week. At the beginning of the year there were 8 members, who have progressed very favourably in gaining confidence, stability and sociability.

It is interesting to note the improvement in speech and co-operative conduct in children who are very often shy, and difficult mixers, in view of their disabilities. Four members have been able to proceed to the normal primary schools.

This club has been greatly indebted to the voluntary workers and especially to the Rotherham Rotary Club, who have so ably assisted in the provision of transport to the from these happy afternoons.

SOCIAL CASE WORK

CARE OF THE UNMARRIED MOTHER

During 1956 16 unmarried mothers were specially cared for. Of these, seven were admitted to Mother and Baby Homes (six to St. Agatha's Mother and Baby Home, Sheffield, one to St. Margaret's Mother and Baby Home, Leeds). One of the babies was adopted and the rest are to remain with their mothers. Seven girls were able to stay in their own homes, their parents being willing to accept the responsibility of the girls and their babies. Two other girls were cohabitees, awaiting to marry when their partners were free to do so.

Seventeen other mothers had already established homes where the baby's accommodation and care presented no problem (widows and cohabitees).

ILLEGITIMATE CHILDREN

32 newly born illegitimate babies came under the care of the Social Worker. Once again the young unmarried mother was able to cope better with her added responsibility, reinforced with National Insurance, Maternity Allowance and grants.

Child minders were carefully selected by the Health Visitor Social Worker for the daily minding of four children. Other girls were assisted with the care of their babies by relatives, allowing them to continue in employment.

PREVENTION OF BREAK-UP OF FAMILIES

During the year 30 families have received special supervision. These families were threatened with break-up due to various reasons, such as :

- (1) Illness of one or both parents.
- (2) Poor management, inexperience.
- (3) Incompatibility of parents.
- (4) Inadequate living accommodation.
- (5) Young mothers overwhelmed with responsibility.

Assistance has been given to help these families to preserve and maintain a normal family life. Of these families two have removed from the district and five have completely overcome their difficulties.

Since May 1956, 25 families who were previously dealt with in the problem family group have been dealt with in a post-problem group ; of these families two have removed from the district, four families are completely rehabilitated and three other families are making good progress and will be taken from the list in the near future.

SPECIAL CLINIC

Follow up work has been carried out, as usual, on request from this clinic on 24 occasions.

GENERAL STATISTICS

The following statistical summary details the work performed by health visitors, clinic nurses, and clinic assistants (excluding duties undertaken in the School Health Service).

Sections 22, 24, 26, 28, and 51, National Health Service Act.

EXPECTANT MOTHERS

Home enquiries regarding hospital bookings	214
Re-visits	28
First visits expectant mothers other than above	117
Revisits	110
Contacts with social agencies on behalf of mothers	139
Arranging convalescence	56
Escorting duties	—
Visits to maternity wards	25

YOUNG CHILDREN (visits paid after the birth of the child)

Still births :—

Hospital and nursing home confinements	34
Domiciliary confinements	8

Live births :—

Hospital and nursing home confinements	642
Domiciliary confinements	685

CHILDREN 0-15 YEARS—HOSPITAL FOLLOW-UP

1st visits	335
Re-visits	271
Visits to children's wards	29
Attendances at paediatric clinics	56

SOCIAL CASE WORK

Number of cases referred	3
Visits paid to homes	513
Cases referred to N.S.P.C.C.	14
Other social contacts	300
Interviews, etc.	260
Attendances, V.D. clinic	8
Visits, V.D. follow-up	24

CHILDREN UNDER 1 YEAR

Premature babies — nurse's supervisory visits	1223
General routine visits	4389
Illegitimate	414
Ill-cared for	224
Death enquiries	14

CHILDREN 1-5 YEARS

General routine visits, 1-2 years	2568
2-5 years	4734
Illegitimate, 1-2 years	276
2-5 years	818
Ill-cared for, 1-2 years	203
2-5 years	276
Found on area (and not known to have been visited before)	147
Investigations for places in day nursery	—
Contacts with social agencies	162
Visits 5-18 years—illegitimate	612

SOCIAL ENQUIRIES FOR ALMONERS, SHEFFIELD HOSPITAL

First visits	8
Re-visits	6

TUBERCULOSIS

First visits	100
Re-visits	579
Attendance at Chest Clinic	33
Contacts	92

FOLLOW-UP VISITS, HOSPITAL PATIENTS OTHER THAN CHILDREN

First visits	58
Re-visits	33

OTHER INFECTIONS AND INFESTATIONS

Total visits	812
Referred to other agencies	8
Contact swabbing	36

MENTAL DEFICIENCY

1st visits	13
Re-visits	93
Escorting duties	37

ADOPTION AND FOSTERING OF CHILDREN

Enquiries on behalf of adoption societies	-
Visits paid after placing and until order obtained	--
Adoptions by direct placing ..	--
Visits paid after placing and until order obtained	-
Social contacts re adoption	-

VILIGANCE-FOSTERING AND ADOPTION

Cases referred to Children's Officer	1
Visits to homes of fostermothers where arrangements for placing pending	2
Visits to illegitimate children placed in foster homes	2
Enquiries by prospective foster mothers	2
Enquiries re child minding ..	17
Escorting duties	5

GENERAL CARE AND AFTER CARE

First visits	6
Re-visits	5
Ward visits	-
Contacts with other agencies ..	9

MISCELLANEOUS

Ineffective visits	2410
Other visits not included above ..	409
National surveys	7
Nursing Home inspection	-
Nursery classes	84
Child Guidance clinics	62
Psychiatric visits	9
Home visits—school children ..	152

DUTIES DELEGATED BY THE CHILDREN'S COMMITTEE

Visits to Oakwood Grange Nursery	12
Visits to residential homes	-

DUTIES DELEGATED BY THE WELFARE COMMITTEE

Hygiene surveys — temporary accommodation at the Mount ..	51
Visits paid to separate families in accommodation	70

HEALTH EDUCATION

Mothercraft and Health Education talks, clubs, clinics and schools ..	275
Talks to outside organisations ..	2

HOME NURSING

The arrangements for the administration of the service remain as in the previous year.

The two students who were in training at the beginning of the year were successful in passing the examination for the Queen's Roll. During the year two part-time Queen's nursing sisters and one male nurse left. To replace the nurses who resigned, two more staff students commenced training in July ; also three West Riding students entered for training in September and November. On completion of training these nurses will return to the West Riding County Council. Three members of the staff went to York for a one week post graduate course organised by the Queen's Institute of District Nursing.

Once again 22 student nurses from the Rotherham Hospital, Doncaster Gate, spent three days on the district with members of the staff, and were also given a talk by the Home Nursing Superintendent on the history and development of District Nursing. Letters of thanks and appreciation were received from both the student nurses and their tutors.

The following table gives details of the nursing staff employed in the Home Nursing Service during the past five years.

	31st Dec., 1952	31st Dec., 1953	31st Dec., 1954	31st Dec., 1955	31st Dec., 1956
FULL-TIME STAFF					
Superintendent	1	1	1	1	1
Assistant Superintendent ..	—	—	—	—	—
Senior District Nurse ..	1	1	1	1	1
Queen's Nursing Sisters					
females	9	9	12	10	11
male	2	2	3	2	1
Queen's candidates—females	—	2	—	2	5
male ..	—	1	—	—	—
State registered nurses					
females	2	1	1	1	1
	—	—	—	—	—
Sub-totals	15	17	18	17	20
	—	—	—	—	—
PART-TIME STAFF					
Queen's Nursing Sisters					
females	6	6	6	6	5
State registered nurses					
females	6	4	4	4	3
State enrolled assistant nurses					
females	1	1	2	1	1
	—	—	—	—	—
Sub-totals	13	11	12	11	9
Total Staff	28	28	30	28	29
Equivalent to full-time staff	23·3	24·6	25·0	24·6	25·3

At the commencement of the year 408 cases were brought forward and 2,981 were referred during 1956, making a total of 3,389 patients nursed. The types of new cases reported were : Medical 1941 ; Surgical 810 ; Infectious disease 16 ; Tuberculosis 53 ; Maternal complications 31 ; Others 130 — total 2,981 and they were referred by :

General Practitioners	2556	Hospitals	156
Health Dept. Services	31	Applied	238

It will be seen that the largest proportion of new cases were referred by medical practitioners.

The total cases nursed during the year—3,389, is 385 cases less than those nursed in 1955, but the total of 93,395 visits paid during the year is an increase of 4,575 over the previous year.

At the end of the year 435 patients were carried forward and during the year 2,904 patients were removed from the books for the following reasons :

Convalescent	..	..	..	..	..	..	..	2290
Died	..	..	..	..	..	..	..	236
Hospital	..	..	..	..	..	..	..	263
Transferred to other districts	..	..	..	..	..	..	..	124
Referred for other causes	..	..	..	..	..	..	..	41

The following summary shows the increase which has occurred since the service was taken over by the Corporation in July, 1948 :

			Total cases nursed	Visits	Average daily visits paid
1948 (July December)	..	..	963	23442	130·2
1949	..	..	2177	55442	151·9
1950	..	..	2613	62241	170·5
1951	..	..	2720	60838	166·7
1952	..	..	3071	61850	169·0
1953	..	..	3088	64728	177·3
1954	..	..	3667	79976	210·9
1955	..	..	3774	88820	243·3
1956	..	..	3389	93395	255·2

During the past year no permanent nurse was employed for late evening visits and calls, but the staff both full-time and part-time, undertook this duty in turns.

The area distribution of the cases nursed and visits paid was as follows :

Area				Cases	Visits
Blackburn and Holmes	..	..	..	181	4189
Kimberworth	..	..	..	169	4127
Masborough	..	..	..	259	4694
Lower Masborough	..	..	..	143	3529
Broom	..	..	..	122	3348
Broom Valley	..	..	..	154	3471
Clifton	..	..	..	253	4446

Area	Cases	Visits
East Dene	148	3726
Wellgate	188	4658
Canklow	222	4460
Town No. 1	165	5022
Town No. 2	219	4824
Greasbrough	75	3517
Thorpe Hesley	181	3134
East Herringthorpe	241	4589
Thornhill	172	3282
Mr. Palmer	201	5344
Mr. Swyer (book now closed)	155	3562
Mr. Parker (book now closed)	91	2039
Eastwood	50	789
Supervision visits	—	16645
	3389	93395

The classification and age groups of all cases nursed and the visits paid during the year were as follows :

	AGE GROUPS					Total cases
	Under 1 year	1-5 years	5-15 years	15-65 years	Over 65 yrs.	
CASES :						
Medical	104	136	66	877	1081	2264
Surgical	60	59	92	499	169	879
Infectious diseases	2	2	4	8	—	16
Tuberculosis	—	—	—	58	3	61
Material complications	—	—	—	31	—	31
Others	5	1	2	58	72	138
TOTAL CASES NURSED	171	198	164	1531	1325	3389
VISITS PAID :						
Medical	1451	1424	685	21954	40844	66358
Surgical	1112	782	921	9416	8292	20523
Infectious disease	34	66	35	103	—	238
Tuberculosis	—	—	—	3816	226	4042
Material complications	—	—	—	548	—	548
Others	85	5	21	495	1080	1686
TOTAL VISITS	2682	2277	1662	36332	50442	93395

At the beginning of the year there were 8 children under the age of 15 years being nursed and there were 525 new children during the year, making a total of 533 in this age group ; a decrease of 171 cases as compared with the year 1955. As always, the majority of children were reported by general practitioners. The total number of visits paid was 6,621 as against 7,607 the previous year—a decrease of 986 visits.

During the year the 499 cases were removed from the register when convalescent and, of the remaining 34 children, 17 were subsequently admitted to hospital, 5 were transferred to other areas, one baby died when only a few weeks old from a congenital malformation, and the remaining 11 children were still being nursed at the year end.

As there have not been so many children to be cared for during this past year, the two children's nurses have been of great help in doing relief work especially in cases some distance from town ; and also helping to take the nurses to their various districts on Sunday mornings, thereby dispensing with the services of the Ambulance car.

The number of aged sick has increased again, there were 1,083 new patients and 242 remaining from 1955 making a total of 1,325 patients nursed and 50,442 visits paid—an increase of 5,556 visits. The following figures show the results of treatment:

Convalescent	..	..	..	..	..	..	..	624
Hospital	..	..	..	..	..	..	..	140
Died	..	..	..	..	..	..	..	184
Removed	..	..	..	..	..	..	..	101
Remaining	..	..	..	..	..	..	..	276

Once again the Service is indebted to the Home Help Service for all the assistance they continue to give to the nurses in helping to care for the old people both day and night.

As in previous years, thanks are expressed to all kind friends for continued voluntary help and support, which has again enabled us to bring some comfort in the homes of our needy sick patients. These gifts include a cheque for £25 from the Rotherham District Nursing Commemoration Fund ; and cash grants from the Rotherham Distaff Club, The Inner Wheel and Church of Our Father. During the year several large parcels of warm clothing for the children and adult patients have been received from friends in New Zealand who continue to take an interest in our work. From many local people we had large parcels of toys and books for the sick children. The donations received for the patients were spent in buying extra nourishment for those in need in the form of butter, tea and sugar, biscuits, fruit, Ovaltine, Horlicks, Lucozade and orange squash. Tobacco and cigarettes, shaving soap, talcum powder, face flannels and soap were given to several of the patients.

VACCINATION AND IMMUNISATION

VACCINATION

During the year records were received of 545 persons who were vaccinated or re-vaccinated. Details of these are given in the following table :

	Under 1 year	1 to 2 years	2 to 4 years	5 to 14 years	15 years or over	Total
Vaccinations ..	354	24	19	8	48	453
Re-vaccinations ..	3	—	3	13	73	92

Of these the records of 278 persons were received from 36 private medical practitioners and the remainder from the Corporation's medical officers at the various clinics in the borough.

No cases were reported during the year of generalised vaccinia or post-vaccinal encephalomyelitis, nor were there any deaths from complications of vaccination.

IMMUNISATION—DIPHTHERIA

No change was made during 1956 in the arrangements for immunisation. Fixed clinic sessions were held at Ferham House and Cranworth Road Centres, and facilities were also available at any child welfare or school clinic session.

1320 children completed a full course of primary immunisation during 1956 as compared with 1088 in 1955. Re-inforcing doses were also given to 567 children as against 701 the previous year. 384 records of immunisation and re-inforcing doses were received from 43 medical practitioners, the remainder being carried out by the Corporation's medical staff at clinics and schools. The age groups of the children at the time of immunisation were as follows :

	Under 1 yr.	1-4 yrs.	5-14 yrs.	Total
Number of children who— completed a full course of primary immunisation ..	760	432	128	1320
received a secondary (re- inforcing injection) ..	—	91	476	567

The figures for diphtheria immunisation show an increase of 232 primary immunisations compared with 1955. This is partly due to the fact that during 1956 the mobile ambulance visited children at home.

During 1956, concentration of effort has been directed to the immunisation of children before their first birthday and of 1,320 children immunised during the year, 760 were under one year old—57.6 per cent.

Of this 760, 536 were born in 1955 and 224 were born in 1956. As these latter children must be 8 months old before immunisation, this is equal to 50 per cent. of the children born in the first four months of the year. In comparison with 1955, when 149 of the children born that year were immunised, the 1956 figure is equal to a 50 per cent. increase.

This concentration of effort has similarly had an effect on the children born in 1955. Taking the 149 immunised in 1955, the 536 immunised under 1 year of age in 1956 and a further 175 immunised between 1 and 2 years of age, totalling 860 less 7 transfers—a net figure of 853, this is 102 more children immunised or 13.5 per cent. increase on the 1-2 years age group figure brought forward at the commencement of the year.

The position at the end of the year in Rotherham regarding immunisation in relation to the child population is given in the following table which gives details of all children who had completed a course of immunisation at any time before that date :

Age at 31.12.56 i.e. born in year	Under 1 yr. 1956	1-4 yrs. 1955-1952	5-9 yrs. 1951-1947	10-14 yrs. 1946-1942	Under 15 yrs. total
Last complete course of in- jections whether primary or booster.					
1952-1956	222	3,591	4,954	904	9,671
1951 or earlier	—	—	528	4,407	4,935
Estimated mid-year child popu- lation	1,340	4,960	13,900		20,200
Immunity Index	16.6	72.4	42.1		47.9

WHOOPING COUGH

During the year 1183 children received injections of diphtheria-pertussis vaccine and 7 received injections of whooping cough vaccine, making a total of 1190 children immunised.

At the end of the year there were 7429 children under the age of 15 years who had been immunised against whooping cough. The following table gives details of the age groups of these children.

1942 — 28	1947 — 746	1952 — 721
1943 — 53	1948 — 839	1953 — 818
1944 — 79	1949 — 651	1954 — 821
1945 — 117	1950 — 650	1955 — 817
1946 — 274	1951 — 600	1956 — 215
—	—	—
Totals — 10-14 years 551	5-9 yrs. 3486	0-4 yrs. 3392
—	—	—

B.C.G. VACCINATION

355 children were skin tested at the Chest Clinic during 1956 under the contact scheme. Of these 154 were found negative and 89 children were vaccinated. Three young children were admitted into the Oakwood Grange Nursery during the period of vaccination and testing in order to have effective isolation.

Under the School Children Scheme authorised by the Ministry of Health Circular 22/53 it was possible for the first time to undertake the vaccination of all the 13-14 year old age group and an acceptance rate of 61.1 per cent. was received in response to the vaccination offer.

The following statement gives details of the testing and vaccinations performed during the year :

Total number of children in age group	..	..	..	1194
Total number of children for whom consent to vaccination was received :—				
Tested and found positive (30.8%)	..	..	215	
Tested and found negative (69.2%)	..	..	483	
Rejected because of eczema	..	..	2	
Absent on all occasions	..	..	25	
Absent during reading of tests	..	..	4	
Left the district after first test and not read	..	..	1	
			<hr/>	730
Total vaccinations :—				
Primary vaccinations	..	..	483	
Re-vaccinations	..	..	3	
			<hr/>	486
Converted (98.8%)	..	..	477	
Remaining negative at the end of year	..	..	6	
			<hr/>	483

A notification of the results of the tests and vaccination is sent to the family doctor of each child by the Health Department.

Details as to the general procedure and detailed arrangements for this work will be found in the Report of the School Health Service accompanying this report.

POLIOMYELITIS VACCINATION

Early in the year, the Ministry of Health notified local health authorities that supplies of poliomyelitis vaccine would be made available during May and June, 1956. A letter offering vaccination was addressed to parents of children aged between 2 years and 9 years in the County Borough and was circulated in February through the primary

schools and child welfare clinics. Attached to the letter was a form of consent to be completed by parents and returned to the Health Department in time for the number of children registered under the scheme to be sent to the Medical Research Council by 14th April, 1956. Registrations were accepted until 11th April, when the records of the following numbers of children for whom consents had been received to vaccination were completed :

Year of birth	..	1947	1948	1949	1950	1951	1952	1953	1954	Total
Children registered		661	583	565	475	265	158	137	51	2895

A limited supply of vaccine became available and the Ministry selected children born in the month of November in each of the years 1947 to 1954 and those born in March in each of the years 1951 to 1954 to receive the first injections. Any vaccine left over from the selected months was to be given to children born in August in each of the years 1947 to 1954 who were deemed to be the reserve group. Children were therefore vaccinated during May and June in that order. A further supply of vaccine was expected later in the year and the children selected were those remaining from the reserve group of August 1947 to 1954, together with those born in the month of October in the years 1951 to 1954 ; the new reserve group being May in the years 1947 to 1954. However, when supplies of vaccine were issued in November, only a very small quantity was received—sufficient to complete the vaccination of some of the children who had previously received only one injection of the vaccine. In all, 277 children received two injections and 5 children received one injection. Details of these are given in the following statement and the figures in brackets are those who only received one injection :

Year of birth	..	1947	1948	1949	1950	1951	1952	1953	1954	Total
Children born in										
March	..	—	—	—	—	28	11	12(1)	10(1)	61(2)
August	..	14	14	14	13	7	8	8	—	78(1)
November	..	31(1)	31(1)	30	26	6	9	5	—	138(2)
Totals	.. ..	45(1)	45(1)	44	39	41	28	25(1)	10(1)	277(5)

The proportion of children as to boys and girls who were registered was fairly even, there being 1,482 boys and 1,413 girls in the original list. Of the children vaccinated, 137 boys received two injections and 3 received one injection of the vaccine whilst 140 girls received two injections and 2 received one injection.

No further notice was issued to parents, but the publicity in the press regarding vaccinations created occasional applications from parents for their children to be registered. Between April and the end of the year a net figure of 185 children were so registered (after deducting transfers and cancellations) which brings the numbers of children awaiting vaccination to :

Born in the year ..	1947	1948	1949	1950	1951	1952	1953	1954	Total
Children remaining from the first regist- ration requiring									
One injection	1	1	1	—	—	—	1	1	5
Two injections	615	537	520	436	224	130	111	40	2613
Net registrations									
April-December									
1956. ..	21	9	7	6	26	43	45	28	185
Total remaining to be vaccinated	637	547	528	442	250	173	157	69	2803

AMBULANCE SERVICE

The Ambulance Service continued to function as a joint service with the Fire Brigade as in previous years and was operated from the Fire Station, Erskine Road, Rotherham, under the direction of the Chief Fire Officer who is also the Director of the Ambulance Service.

No alterations have been made in the arrangements made with neighbouring authorities of the West Riding County Council and the City of Sheffield. The Council also operate the 'knock for knock' arrangements with other authorities who operate the scheme.

The installation of Radio-Telephones continues to be a great success, particularly in the economical use of vehicles. Originally it was estimated that from 6-8 ambulances and 4-6 cars would be required, whilst in actual fact the Service is operating quite well on 5 ambulances and 4 transit ambulances. This is made possible to a great extent by the installation of the radiophone system. On many occasions it has proved invaluable, in being able to divert vehicles to urgent cases, whilst operating in the vicinity, rather than turn out another vehicle.

The details of cases dealt with and the mileage involved in the year 1956 were as follows :

		Ambulances	Cars	Totals
Cases removed—				
within the Borough	..	5775	21629	27404
other authorities	..	698	345	1043
		<hr/>	<hr/>	<hr/>
	Total	6473	21974	28447
		<hr/>	<hr/>	<hr/>
Mileage—				
within the Borough	..	53184	52161	105345
other authorities	..	6496	2792	9288
		<hr/>	<hr/>	<hr/>
	Total	59680	54953	114633
		<hr/>	<hr/>	<hr/>
Number of accident and other emergency journeys included in the above				
	.. ..	1482	257	1739

PREVENTION OF ILLNESS, CARE AND AFTER CARE.

HOSPITAL LIAISON

INVESTIGATIONS OF HOME CONDITIONS

The following table gives details of the work performed by Health Visitors and Home Help Visitors during the year under the arrangements made with the Rotherham and Mexborough Hospital Management Committee for the furnishing of home reports where necessary for inclusion in the patient’s hospital record. Similarly, all discharges from hospital are notified and follow-up visits are paid to the homes of children, old people, and other cases where a request for this has been made :

				Hospital	Number of visits	
					Health Visitors	Home Help Visitors
Visits to hospitals, etc.						
Paediatric clinics and wards	..	..		Rotherham Hospital	30	
				Moorgate General Hospital	26	
Maternity wards	..	..	..	Moorgate General Hospital	41	
Geriatric wards	..	..	..	Moorgate General Hospital		125
				Badsley Moor Lane Hospital		67
General wards	..	..	..	Rotherham Hospital	6	
				Moorgate General Hospital		
Chest Clinic	..	..	..		33	
Investigation of home conditions.						
‘A’ forms for children admitted to hospital and including special reports requested by Paediatrician or Chest Physician from health visitor attending clinic	..	..	..	Moorgate General Hospital	335	
				Rotherham Hospital		
				Oakwood Hall Hospital		
‘A’ forms for aged sick admitted plus any special reports asked for by Physician				Moorgate General Hospital		338
				Badsley Moor Lane Hospital		25
				Rotherham Hospital		405
				Rosehill Hospital		2
Aged persons surveys of home conditions for future care	..	..	..	Moorgate General Hospital		338
				Badsley Moor Lane Hospital		25
				Rotherham Hospital		405
‘A’ Forms, for aged sick and others	..			Moorgate General Hospital	6	
				Rotherham Hospital		
				Oakwood Hall Hospital		
Tuberculosis survey visits	..	..		Oakwood Hall Hospital	100	
Enquiries from almoners of Sheffield hospitals re home conditions	..		..	Sheffield Royal Hospital	14	4
				Sheffield Royal Infirmary	(all	5
				Sheffield Nationl Centre for Radiotherapy	sources)	10
Reports and social conditions re applications for hospital confinement	..			Moorgate General Hospital	214	
				Listerdale Maternity Home		
				Hallamshire Maternity Home		

Supervisory visits to patients on discharge from hospital

'B' forms and special requests for children	Moorgate General Hospital	}	271
	Rotherham Hospital		
	Oakwood Hall Hospital		
'B' forms and special requests for aged	Moorgate General Hospital		129
	Badsley Moor Lane Hospital		19
	Doncaster Gate Hospital		324
	Rosehill Hospital		2
'B' forms and special requests for others including tuberculosis	Moorgate General Hospital	}	24
	Rotherham Hospital		
	Oakwood Hall Hospital		

PAEDIATRIC CLINICS

As in previous years weekly visits were paid to the Paediatric Clinic at Moorgate General Hospital and Doncaster Gate Hospital. Valuable information both to the paediatrician and the health department concerning the welfare of the children was transmitted. Visits made by health visitors and attendances by the children at these clinics were as follows :

			Moorgate General Hospital	Doncaster Gate Hospital
Clinics visited				
Children attending under 5 years	..	..	110	83
Children attending over 5 years	..	..	156	72

MATERNITY DEPARTMENT, MOORGATE GENERAL HOSPITAL

Weekly liaison visits were made to this department by health visitors throughout the year. This service is a great benefit to the patients and their families.

Number of visits made	41
Number of mothers interviewed	310

THE CHEST CLINIC

The liaison with the Chest Clinic has continued throughout the year. The transfer of information in the interest of the patients has been of great value to both departments.

150 children and 50 adults were referred for examination as contacts during the year.

HOME ACCIDENTS

During 1956 a total of 6,087 accidents occurred in the home, as compared with 6,787 in 1955. No doubt the publicity given on this subject has helped to reduce the total number of accidents. The following table gives the number of persons who were treated for home accidents during the year at Doncaster Gate Hospital :

	AGE PERIODS						Total	
	Under 5 years		Over 5 years and under 65 yrs.		65 years and and over			
	1956	1955	1956	1955	1956	1955	1956	1955
January	46	(56)	264	(300)	25	(28)	335	(384)
February	30	(58)	412	(308)	19	(29)	461	(395)
March	86	(77)	330	(436)	24	(24)	440	(537)
April	82	(102)	373	(448)	18	(23)	473	(573)
May	99	(84)	515	(385)	22	(26)	636	(495)
June	70	(100)	492	(444)	18	(21)	580	(565)
July	92	(80)	446	(525)	36	(17)	574	(622)
August	108	(132)	440	(542)	15	(15)	563	(689)
September ..	96	(118)	480	(512)	15	(33)	591	(663)
October	82	(85)	441	(591)	20	(28)	543	(704)
November ..	44	(55)	400	(627)	27	(22)	471	(704)
December ..	39	(48)	361	(372)	20	(36)	420	(456)
Totals	874	(995)	4954	(5490)	259	(302)	6087	(6787)

Included in these figures were the following cases of burns and scalds occurring in the home :

		AGE PERIODS												Totals			
		Under 5 years				5 years and under 65 yrs.				Over 65 years							
		Burns		Scalds		Burns		Scalds		Burns		Scalds		Burns		Scalds	
		1956	1955	1956	1955	1956	1955	1956	1955	1956	1955	1956	1955	1956	1955	1956	1955
January	..	7	(6)	3	(8)	4	(4)	7	(2)	1	(-)	-	(-)	12	(10)	10	(10)
February	..	4	(7)	2	(4)	4	(5)	8	(6)	-	(-)	-	(1)	8	(12)	10	(11)
March	..	3	(2)	6	(5)	2	(3)	5	(9)	-	(2)	-	(-)	5	(7)	11	(14)
April	..	3	(3)	4	(3)	1	(5)	6	(4)	1	(-)	-	(-)	5	(8)	10	(7)
May	..	2	(3)	7	(3)	5	(5)	6	(5)	-	(1)	1	(-)	7	(9)	14	(8)
June	..	4	(13)	2	(1)	5	(2)	3	(7)	-	(-)	-	(-)	9	(15)	5	(8)
July	..	3	(8)	2	(3)	4	(8)	3	(7)	-	(-)	-	(-)	7	(16)	5	(10)
August	..	4	(1)	4	(6)	4	(8)	5	(7)	-	(1)	-	(-)	8	(10)	9	(13)
September	..	2	(4)	3	(4)	8	(7)	8	(5)	-	(-)	-	(-)	10	(11)	11	(9)
October	..	5	(1)	3	(3)	7	(8)	2	(5)	-	(-)	-	(1)	12	(9)	5	(9)
November	..	6	(2)	-	(5)	13	(17)	1	(8)	-	(1)	-	(1)	19	(20)	1	(14)
December	..	4	(2)	4	(9)	3	(7)	8	(5)	1	(1)	2	(2)	8	(10)	14	(16)
Totals	..	47	(52)	40	(54)	60	(79)	62	(70)	3	(6)	3	(5)	110	(137)	105	(129)

TUBERCULOSIS

During the year 77 new cases of tuberculosis were notified or came to the notice of the Medical Officer of Health. As a result of the combined efforts of the Chest Physician and the Health Visitors, 92 persons were examined as contacts at the contact clinic. Persons who failed to keep their appointments were revisited and urged to attend.

In every household where there was a known case of tuberculosis, parents of young children were informed of the benefits of B.C.G. vaccination and 89 children were vaccinated during 1956.

The action taken regarding unnotified cases of tuberculosis includes the visiting of the relatives of the deceased person by the health visitor and advice is given on the prevention of the spread of the disease, and wherever they are willing appointments are made for contacts to attend the chest clinic. This is not a frequent occurrence as the majority of cases have been notified prior to death.

The health visitors paid 679 visits and re-visits to patients during 1956 and made 33 attendances at the Chest Clinic for the purpose of exchanging information regarding cases or contacts of the disease. 61 cases were nursed at home by the Home Nurses who made 4,042 nursing visits. Details of these cases will be found in the Home Nursing Section of this report. The Home Help Service also contributed their part and 3 cases received 409 hours of service under the scheme of home helps.

TUBERCULOSIS CARE COMMITTEE

No new extension occurred during the year ended 31st March, 1957, in the work of the Tuberculosis Care Committee and its scope has continued on the lines indicated in previous reports. The area covered by the Committee is that of the Rotherham Chest Clinic area comprising the County Borough of Rotherham and the surrounding West Riding districts of Maltby and the Rawmarsh Urban District Councils and the Rotherham and the Kiveton Park Rural District Councils.

At the annual meeting of the Committee, His Worship the Mayor of Rotherham (Mr. Councillor F. Davies) accepted the office of President of the Committee for the ensuing year and Mr. Alderman A. Buxton, J.P., and Mr. Councillor A. Wilde were re-appointed Chairman and Vice-Chairman respectively of the Committee. There was no change in the membership of the Committee until February, 1957, when Mr. Councillor J. C. Micklethwait, who had been a member of the Committee since 1934, resigned from the Council. The resultant vacancy on the Care Committee was left unfilled until after the annual re-appointment of the Health Committee.

The scheme of the care and after-care is operated through the Rotherham Chest Clinic and all recommendations for assistance are made by the Chest Physician. Secretarial assistance and other sundry expenses were provided by the Rotherham Corporation and are given a token value of £40. A grant of £180 was made by the West Riding County Council as their donation towards the year's expenses.

Grants of clothing, bedding, and extra nourishment made to patients amounted to £65 16s. 10d. during the year. The Committee also continued their grant of £3 0s. 0d. a month to the Medical Superintendent of the Oakwood Hall Hospital for the provision of concerts and prizes for whist drives, etc., held at the hospital for the patients, together with a grant of £20 for the provision of extras at Christmas. The scheme of Christmas grants to patients granted leave from hospital was again continued, together with grants to those necessitous patients receiving treatment at the Chest Clinic or in receipt of assistance from the Committee ; cash grants up to a maximum of £2 0s. 0d. each were made. In all 69 grants were made to Rotherham patients at a cost of £94 0s. 0d. and 66 grants were made to W.R.C.C. patients totalling £88 0s. 6d., a grand total of £182 0s. 6d.

Six men were employed by the Car Parks Scheme during the year, four of whom live in Rotherham and two live in the West Riding area. Five of these men were employed throughout the whole year and one man was employed as a relief attendant for holidays, etc., only during the summer period. All these men are under the care of the Chest Physician at the Chest Clinic and full co-operation is maintained with the Local Rehabilitation Officer of the Ministry of Labour and National Service.

The temporary car park in Percy Street was operated throughout the whole year. It was discontinued shortly after the period which this report covers owing to the land being required for the extensions to the Technical College. This car park, during its 15 months existence, was never fully supported by motorists who preferred to park their cars in nearby side streets to the centre of the town. After the car park had commenced operations, the attendant's hours of cover were adjusted to meet the peak periods—dances, etc., on certain evenings so as to endeavour to give service on the peak hours and a collection box was fitted to the hut for contributions from motorists when the attendant was not on duty. The Committee's charges of 6d. for four hours has remained unchanged for several years and they have endeavoured to provide a service to motorists at a reasonable charge, whilst equally desirous of finding light employment for suitable ex-sanatorium patients.

The expenditure on the car parks scheme for wages and N.I. contributions was £2,045 18s. 9d. ; rent and rates £83 15s. 4d. ; electricity and repairs £54 13s. 11d. ; printing £38 3s. 6d. ; adaptation (including attendants hut) to Percy Street £68 13s. 7d. ; and miscellaneous expenses £19 7s. 6d., making a total of £2,310 12s. 7d. The receipts from the Car Parks amounted to £1,816 7s. 0d., leaving a deficit on the year's working of £494 5s. 7d.

In the rehousing of tuberculous families, the Corporation's Housing Department rehoused five families outside the "points" scheme during the year under the arrangement whereby batches of 12 houses are placed from time to time for the priority recommendations of the Chest Physician. Two patients were rehoused by the Rawmarsh U.D.C. on the reports of the West Riding Divisional Medical Officer (Area No. 26) following the Chest Physician's recommendations. In the other West Riding

area (No. 31), which includes the Rotherham Rural District, the Maltby Urban District and the Kiveton Park Rural District, nine patients were rehoused. It will be seen that altogether 16 tuberculous patients were rehoused under the several schemes operated by Councils in the Committee's area during the year.

The Care Committee continued its affiliation to the National Association for the Prevention of Tuberculosis. At the annual meeting of the Committee, it considered the question of the amendment of its constitution to include non-tuberculous diseases of the chest and heart. This amendment has been adopted by the National Association who had left its adoption quite optional to its associated Care Committees whilst making it quite clear that the care of the tuberculous was as before, its primary object. After consultation with the West Riding County Council, who were prepared to agree to whatever course was adopted, it was decided not to amend the local constitution but to re-consider this question again in twelve month's time.

The Committee again participated in the Christmas Seal Sale organised by the National Association, and this effort provided the main source of income for the year. The number of seals purchased was 200,000, and it is pleasing to report a sale of seals and donations amounting to £360 4s. 10d. The expenditure in respect of the seals, postages, printing and stationery, amounted to £25 0s. 2d. and in accordance with the seal sale arrangements a donation equal to five per cent. of the receipts and equal to £18 0s. 3d. was remitted to the National Association. This left a net balance in hand which was paid into the local fund amounting to £317 4s. 5d. The thanks of the Committee are expressed to all who purchased seals and made donations, and to the members of the staff of the Health Department who gave their services in this successful effort.

HEALTH SERVICES BUREAU

The Health Committee decided to close the Health Services Bureau on the 31st March, 1957, after considering the type of work being undertaken. The Bureau has served a very useful purpose since the inception of the National Health Service in keeping the public informed of the various services. On the investigation of the types of enquiries which were being made it was obvious that the general public now have a better understanding of the services available.

HEALTH EDUCATION AND PUBLICITY

The main item of publicity during the year was again centred on Mass Radiography, and the display had for its theme "Don't Miss the Bus."

For the first time a display was put on for the Family Planning Association with the theme of "There was an old woman who lived in a shoe." The large shoe was constructed by the students of the School of Art, and in this connection the Principal, Mr. H. T. Smith, was most helpful. The doll used in this display was kindly loaned by Miss Gray, Children's Officer.

VISUAL AID INSTRUCTION

The cinema and slide projector are in fairly constant use by the Health Department at Ante-Natal and Mothercraft Classes, group discussions, Child Welfare Centres and the Rotherham Father's Club. Lectures and demonstrations were undertaken by members of the staff for various voluntary organisations and a Home Safety Week Exhibition in a large store by kind permission of a prominent local firm gave staff members an opportunity of publicising this important aspect of preventive medicine, for the Home Safety Committee.

NURSING EQUIPMENT

During the year the following appliances were loaned at the request of General Practitioners and Home Nurses. An increase of 224 on the previous year.

Rubber sheets	331	Bed tables	3
Draw sheets	353	Crutches	33
Bed pans	366	Bed Cages	40
Bottles	212	Dunlopillo mattresses ..	15
Back rests	213	Commodes	7
Air rings	201	Feeding cups	17
Dunlopillo rings ..	11	Sputum mug	1
Wheel chairs	68	Kidney trays	2
Walking sticks	11		

VOLUNTARY ORGANISATIONS

Those services which are out of the scope of the Local Authority have been met by the generous help of many voluntary organisations and we acknowledge the help given by The Rotherham District Nursing Benevolent Association, the W.V.S., the Stoddart Samaritan Fund, the S.S.A.F.A., the Sheffield Marriage Guidance Council and the Council of Social Service.

SUMMARY OF ENQUIRIES

An analysis of these is given in the following tables :

LOCAL AUTHORITY HEALTH SERVICES

Home Helps	49
Convalescence	143
School and child welfare	7
Sanitary matters	20
Nursing appliances	2121
Tuberculosis	2
Ambulance	45
Midwifery	75
Nursing	6
Immunisation	10
General Health matters	34
Blind welfare	129
Social worker	14
Housing	3
Posters and pamphlets	63
Window displays	82
Mental health	2
Polio vaccination	26
Health education	2
Civil defence	1

2834

EXECUTIVE COUNCIL SERVICES

Dental lists, benefits, etc.	6
Optical lists, benefits, etc.	-
Medical lists, benefits, etc.	2
Medical cards	-
Forms E.C.1 and completion	-
Change of doctor	-
Chemists open	1
Sundries	2

11

HOSPITAL AND SPECIALIST SERVICES

Appliances :—	
Surgical	8
Deaf aids	34
Appointments	2
Sundry enquiries	3
Chiropody	-
Chest radiography	93
Blood donors	10

150

NATIONAL INSURANCE ACT

Benefit enquiries :—	3
Sickness	-
Maternity	16
Death	-
Widows	1
Compensation	-
Retirement	-

20

GENERAL

Assistance Board	18
Location of offices	159
Advice re-employment	1
Forms completed	-
General assistance and sundries	408
General visit	22
Legal aid	15
Marriage Guidance	1

624

SUMMARY	Total	Per Cent.
Local Authority Health Services	2834	77.87
Hospitals	150	4.12
Executive Council	11	.31
National Insurance	20	.55
General	624	17.15
Total	3639	100.00
Number of people making enquiries		3604

DOMESTIC HELP

The work undertaken by the Home Help and Social Welfare Section again shows a gradual progressive increase in the demands made for assistance and great care has been exercised to supply help within the limits of the service.

Early in the year in view of the considerable expansion of the service which has obtained since the appointed day in 1948 it was decided to review the duties of the staff employed in the Section. It was approved that as from April, 1956, in view of the increased administrative work the establishment was increased by one post of Deputy Home Help Organiser. The clerical staff who had been employed in visiting, etc., were graded and designated as visitors whilst those whose duties were clerical remained in their original grading. Following a repeated advertisement for the post of Deputy Organiser to which there was only a small response, the Committee decided to promote Mrs. G. Stevenson of the visiting staff to the vacancy.

As in previous years the major part of the service has been concerned with providing assistance in cases of old age. It is accepted that generally elderly people are not easy to care for and the staff are called upon to assess and assist distressingly tedious cases. This often calls for ingenuity in improvisation when situations and conditions have been most difficult.

The following table gives details of the 783 homes served by the Home Help Service during 1956 as compared with the previous year :

Type of Case	Brought forward from 1955		New Cases		Total 1956	Total 1955
	Days	Nights	Days	Nights		
Maternity	9	—	143	—	152	161
Sick children	—	—	3	—	3	2
Tuberculosis	2	—	1	—	3	6
Other sickness	25	—	67	—	92	117
Old Age	269	7	207	27	510	450
Evening Service	4	—	8	—	12	12
Rehabilitation	—	—	—	—	—	1
Tired mothers	1	—	10	—	11	11
Total	310	7	439	27	783	760

An analysis of the hours of service rendered by Home Helps during 1956 is given in the following table and for the purposes of comparison, the corresponding figures for the previous year are given in brackets :

	Day (Hours)	Evening (Hours)	Night (Hours)	Total (Hours)	Decrease (Hours)	Increase (Hours)
Maternity	14,942 (14,891)	— —	— —	14,942 (14,891)	— —	51 —
Sick children ..	220 (404)	— —	— —	220 (404)	— 184	— —
Tuberculosis	409 (1,321)	— —	— (24)	409 (1,345)	— 936	— —
Other sickness ..	15,266 (18,181)	— —	— (136)	15,266 (18,317)	— 3,051	— —
Old age	140,759 (119,091)	1,188 (1,240)	2,556 (3,543)	144,503 (123,874)	— —	20,629 —
Domestic crises ..	— (700)	— —	— —	— (700)	— 700	— —
Rehabilitation ..	— (453)	— —	— —	— (453)	— 453	— —
Tired mothers ..	1,361 (1,480)	— —	— (32)	1,361 (1,512)	— 151	— —
Washing centre ..	2,896 (2,119)	— —	— —	2,896 (2,119)	— —	777 —
Totals—1956 ..	175,853	1,188	2,556	179,597	5,475	21,457
1955 ..	(158,640)	(1,240)	(3,735)	(163,615)	—	—

There was a net increase of 15,982 hours of service rendered during the year which is equal to the employment of 7 additional staff full-time for the whole year.

NIGHT AND EVENING SERVICE

This service operated as detailed in previous reports and is greatly appreciated by the general practitioners, who are able to call for assistance at short notice. It is also of great value to the hospital services in-so-far as it takes care of a patient until a hospital bed can be offered, but the most poignant thanks to the service come from the old people themselves, who are most grateful to be allowed to end their days in their own home.

RECRUITMENT

It is becoming more difficult to recruit full-time helpers and it is only possible to maintain the service by part-time women being prepared at short call to work additional hours in times of crisis. Experience has shown that if the Home Help is to be used in a creative way there is a need for much flexibility of her working hours

and as a result home helps are called upon to work split duties. This means that their working hours have to be planned to meet the needs of the situation and not to a rigid definition of a working day.

The following are the recruitment figures for the year :

Brought forward from 1955	..	..	..	..	..	114
Home Helps employed	..	..	..	..	..	164
An increase of	..	..	..	..	..	20

CARE OF THE AGED

The demand for help has continued to grow throughout the year. Elderly people seldom make a full recovery from a severe illness and this leaves them with increasing dependence upon this Service. The increased demand has resulted in many more visits being made to relatives to prevail upon them to help with the care of their parents. It has been repeatedly pointed out that the assistance given by the Home Help Service must be used as a supplement to, not as a responsibility for, cases where there are relatives. In order to avoid creating any misunderstanding, it must be appreciated that the usage of the Home Help Service is only equal to an average of 4.36 hours each case per week and relatives, neighbours and friends, are responsible for the remainder of the time. Caring for the elderly is the main reason for the increased cost of the Home Help Service. Out of a total of 179,597 hours given during the period under review, 144,503 hours were given to this group to enable them to remain in their own homes. This is an indication of how social concepts of the care of the aged have changed, and it certainly illustrates how community attitudes toward provision for older people have moved from hospital or institutional care to that of home care which is far less costly. This is a point of fundamental importance when assessment is made of the increased costs of the Home Help Service.

It is equally important to keep in mind that owing to the gradual deterioration of the long term cases, it will be necessary for careful and thoughtful planning to be undertaken to enable additional hours of service to be given where required and if this Service is to develop, new ideas will need to be accepted and old ideas to be put into operation, e.g. Home Help Mobile Units.

Whilst a considerable amount of time is being given by this Service, many old people still lead a very lonely existence. It is often pointed out to the Organiser whilst on her round of visits that “nobody understands we old people want something to do.” It is often the thought of being “shut out” of occupational activities which causes gradual deterioration and it is suggested that Occupational Therapy in their own homes is one way of giving old people “something to do.”

Social development has never been free from opposition but if old people are to be given the necessary care and attention to which they are due, we must look to the future with vision and step forward with new ideas to provide or retain any social service connected with domiciliary care.

HOSPITAL LIAISON

Information concerning home conditions is given to the hospitals as a guide for their consideration of priority for admission and suitability for discharge. The home visiting also serves to keep the priorities of the hospital waiting list under review.

The work performed by Social Workers during the year is shown as follows :

					Doncaster		Badsley	
					Gate	Moorgate	Rosehill	Moor Lane
					Hospital	Hospital	Hospital	Hospital
Number of visits to hospitals	..	..	..	..	—	94	—	42
Number of interviews in hospital	..	..	..	..	—	31	—	25
Number of home visits	..	..	..	..	405	338	—	25
Number of investigations on home conditions	..			..	405	338	2	25
Number of cases for supervision of Social Worker								
on discharge	..	..	..	..	324	129	2	19
Number of home helps arranged for patients on								
discharge	..	..	..	..	26	22	—	3

DOMICILIARY MEALS SERVICE

The initiation of this service was described in the Annual Report for 1955 and the first experimental period of nine months ended in June of this year. The Scheme is run jointly by the Old People's Welfare Committee and the Local Health Authority, and is administered and operated by the Home Help Organiser and Social Worker for the Aged. Recent surveys have shown the frequency of nutritional defects in old people because of an inadequate diet, which is often due to apathy, particularly with old people living alone. This Scheme is based on the assumption that every home has normally a certain amount of staple groceries and provisions, and that if these were supplemented by the daily purchase of extras, a full and varied diet could be provided for the patient. Obviously, also, someone must be there to undertake the preparation and cooking of the meals, and so old people were chosen who already had a home help in attendance. All these were over 80 years of age, living alone, and had an income balance of less than two pounds a week after the payment of rent and other weekly payments. In all, 23 cases were selected who came within this category. The majority were house bound and many of them were also bedridden. In effect, they were cases that would normally qualify for admission to geriatric wards or to old peoples' homes.

In each of these cases, the home help in attendance at the home was given the sum of 6s. 3d. per week with which to purchase supplementary food for five of the week's dinners. The old people were encouraged to suggest items for dinner so that their individual likes and dislikes could be respected. The home help was issued with specimen menus as general lines of guidance in order to achieve a balanced diet. The general practitioner in charge of the patient was informed and consulted regarding the structure of the dietry. Records of purchases and menus of meals provided were kept by the home helps and were regularly checked and inspected by the Home Help

Organiser and her staff. Bulletins of ideas for varying the menus were issued regularly to the home helps.

The benefits of this scheme, which takes advantage of the everyday articles to be found in a house, bread, flour, condiments and the like, are more personal to the individual and capable of being provided by an existing service operating in the home. Cooking and shopping is part of the home help's duty to her case, and the scheme is based on provision of a small amount of extra weekly cash for her to buy the basic necessary supplements. It is also pleasing to record the enthusiastic response by the staff of home helps in the working of this scheme. Every woman enjoys cooking a satisfying meal—one which she knows the recipient would like and enjoy.

The observations of general practitioners were requested at the end of the experimental period with regard to the improvement in health of these patients, and the reports received, based on clinical evidence, showed an all round improvement. Apart, of course, from having sufficient funds, the basic essential to run a scheme of this sort is an adequate Home Help Service. In Rotherham, there are 164 part-time home helps, which is equivalent to 1.1 full-time home helps per thousand of the population. During the initial nine months period, 23 old people were served and at the end of the period 19 were still receiving meals, one had died, two had been admitted to hospital, and one had removed from the district. All but two of these patients were house bound and 12 were bedfast. A total of 3,049 meals were served at a cost of £190.

A typical specimen weekly menu is as follows :

Monday	Yorkshire Pudding, Lamb chop, cabbage, potatoes.
Tuesday	Steamed haddock, parsley sauce, potatoes, peas, ground rice pudding.
Wednesday	Liver, potatoes, carrots, orange jelly and sliced peaches.
Thursday	Meat pie, potatoes, beans, ground rice pudding.
Friday	Sausage, potatoes, peas, bilberry pie, custard.

This menu is just one of the many prepared during the operation of the scheme and can be varied according to season and availability of goods.

The importance of the work done by the Chairman, Mr. Councillor P. C. Wright, and members of the Old People's Welfare Committee in financing this project must be stressed, in particular the great personal interest taken by the Mayor, Mr. Councillor F. Davies, whose appeal made such a substantial contribution to the cause.

WASHING CENTRE

It is pleasing again to report no loss or damage of the 44,773 articles received at the Washing Centre during the past year.

The Centre undertakes the washing from households of the chronic sick and the elderly, and it has played a very responsible part in the smooth running of the Home Help Service. Some of its main features being :

- (a) It has enabled a more economical use of the Home Help.
- (b) It has provided a higher standard within the home, and has had a good effect upon the general hygiene of these groups.
- (c) It is possible to receive and return washing from incontinent patients in one hour. This procedure has helped old people whose resources are very limited.
- (d) It has conserved the energy of the home help for more important duties in the home.

The ever increasing demands being made upon the Home Help Service project the pressure upon the Washing Centre and to enable this volume of pressure to be accepted, it has been necessary to seek permission to acquire new premises where more adequate facilities will be provided.

It is apparent each year that this special service is fulfilling a real need to the community.

Interest has still been maintained in the Home Help Washing Centre and further applications for visits and information have been dealt with from numerous Local Authorities.

MATERNITY

Whilst there is a decrease in the number of cases assisted, it is interesting and important to note there has been an increase in the number of hours service given to each family.

The extra help given during ante and post-natal periods, has enabled the mother to rest during very difficult times and the result of the extra help given in the home has produced better family relations.

The midwives have been most helpful and have called upon the Home Help Service many times during the year for extensions of service to be given to their patients. These requests have been given immediate attention.

SICK CHILDREN

The calls made upon the Home Help Service for assistance fluctuate each year. It is reasonable to assume that the mother is able to call upon relatives who are quite able and willing to give a helping hand, as the sickness is usually of a temporary nature and she also receives the valuable assistance of the Home Nursing Sick Children's Unit.

PROBLEM FAMILIES

These families do not always present the greatest need but they do involve the highest cost to the community. With an increasing understanding and the accumulation of experience in providing home help to problem families, one might ask "would not

some of these families be better off if they were left to their own devices ? ” The overriding factor is the great need to educate and help the children to face life with courage and confidence and help them to appreciate the misunderstanding and confusion in their minds created by their parents.

TIRED MOTHERS

A review of the cases that were assisted in the past year shows that all came with a presenting need for temporary service created by a critical change in the family situation.

The application of a Home Help in these cases is the means of keeping together a home, and the Home Help appreciates it is of special importance to always keep in mind the fact that the emotional well-being of the whole family is as important as the health of the patient. It is the Home Help who plays a big part in the easing of family tension which is often caused by the utter weariness of a young mother due to the fact of trying to maintain normal standards following a succession of pregnancies.

The greatest value to be derived from the Home Help Service for this type of case is obtained by application for the service before a crisis develops.

CO-OPERATION WITH GENERAL PRACTITIONERS

One of the most valuable contributions made to this service is the assistance and help given by the General Practitioners, who makes direct contact with the section. This procedure does assist when immediate help is required.

HOME SAFETY

Home safety is a regular feature of the Home Help's duties. It is felt that a number of accidents in the home have been prevented by the practical education that is being demonstrated by the Home Help in the homes of all cases assisted.

BUSINESS MEETINGS

These meetings are indispensable. It is a means whereby discussion assists each helper to appreciate the difficulties experienced by her fellow worker.

HOME HELP'S WELFARE—SOCIAL CLUB ACTIVITIES

The members of the Social Club have again been very active throughout the year. The following social functions have been organised :

- | | |
|----------------------------------|------------------|
| Children's outing to Scarborough | Dances |
| Social evenings | Pantomime |
| Christmas Fayre | Dinner and dance |
| Children's Christmas Party | |

Some of these functions were attended by the Chairman and the Vice-Chairman of the Health Committee and the Medical Officer of Health. The children's Christmas party was a huge success and the Chairman of the Health Committee acted as Father Christmas.

MENTAL HEALTH

The establishment of the Mental Health Service remained unchanged during the year. The work is normally undertaken by the Mental Health Officer, an Assistant Mental Officer—who are both duly authorised officers—and a Trainee Mental Health worker, together with the staffs of the Occupation and the Industrial Centres. In June, Mr. W. P. Thomas, Assistant Mental Health Officer, obtained a post in the South of England and in view of the lack of suitable candidates who applied for the vacancy, it was decided in December to promote the trainee mental health worker, Mr. H. E. Coates, to fill the vacancy and this latter post was still unfilled at the end of the year. No changes occurred in the staffs of the Occupation and Industrial Centres.

The year 1956 has been one of progress and there was a marked reduction in the number of cases admitted into Middlewood Hospital as 'certified' patients under the Lunacy Acts. This resulted in a corresponding increase in those patients entering the hospital voluntarily under the Mental Treatment Acts. In 1955 the number of 'certified' patients admitted was 53 and voluntary patients 41 ; this year only 13 were admitted as 'certified' and 97 as voluntary patients. The problem of senile dementia patient continues to exist and it is very difficult to obtain accommodation for this type of patient. Every effort is made to avoid the certification of old people, but occasionally this has been unavoidable.

The designated wards at the Moorgate General Hospital, Rotherham, which for many years had been used for the reception of cases under Section 20 of the Lunacy Act were closed during the year, and all cases were admitted direct into the Middlewood Hospital, Sheffield. This arrangement has worked satisfactorily and has obviated the delay experienced in transferring patients from the former designated wards at the Moorgate General Hospital and ensured immediate treatment for the patient. The closing of the wards at the Moorgate General Hospital should not be allowed to pass without a word of appreciation of the valuable service this hospital has rendered over a period of many years, and thanks are due to the Medical Superintendent and his staff for their excellent co-operation.

The difficulties experienced in securing hospital accommodation for the mental defective, referred to annually for several years past, has necessitated more and more home visits in order to explain the difficulties to parents, whose problem can only be solved by the provision of accommodation for their mental defective son or daughter. This lack of accommodation in mental deficiency institutions falls very short of the estimated need. The securing of accommodation for low grade cases is virtually impossible ; in the meantime parents, and particularly the mother, bear the burden of caring for these unfortunate people, often to the detriment of health and balance of family life.

Difficulty in arranging short-term care was experienced this year for the first time since the introduction of the scheme. Every effort was made by the Sheffield Regional Hospital Board to meet the need, the Leeds Regional Hospital Board also accepted two cases of great urgency at very short notice. Greater use could be made of the short-term care provisions if more vacancies were available. The limited facilities now available severely restrict the use of the facilities to any but those most desperately in need.

A very pleasing aspect of the service is the great interest shown in the Occupation and Industrial Centres. Many enquiries and visits were made by various organisations including representatives from other local authorities and all the visitors were appreciative of the training provided.

Reviewing the service from the angle of material need the outlook often appears gloomy ; but having regard to the emphasis now placed on prevention and the efforts made towards the acceptance of mental illness in its own perspective and not something that is horrifying or sinister, so that there will be a better understanding of the illness on the part of the general public, then the picture takes on an encouraging and more hopeful aspect.

MENTAL DEFICIENCY ACTS, 1913-38

The following table gives details of defectives in institutions and on licence at the end of the year :

				Resident		On licence leave	
				Male	Female	Male	Female
St. Catherine's Institution, Doncaster	..			29	34	2	—
Stoke Park Colony, Bristol	..	..		3	1	1	—
Whittington Hall, near Chesterfield	..	..		—	6	—	—
Grenoside Hospital, near Sheffield	..	..		7	1	1	—
Aston Hall Institute, Nr. Sheffield	..	..		—	2	—	—
Rampton Hospital, near Retford	..	..		3	1	—	—
Thundercliffe Grange, Rotherham	..	..		1	—	—	—
Moss Side, Liverpool	..	..	..	2	—	—	—
The Manor, Epsom	..	..	..	1	1	—	—
Victoria Hospital, Mansfield	..	..	..	1	—	—	—
Glenfrith Hospital, Leicester	..	..	..	1	—	—	—
Fir Vale, Sheffield	..	..	..	—	1	—	—
Ridgeway Hospital	..	..	..	1	—	—	—
				49	47	4	—

The total number of cases 'under Order' in Institutions shows a decrease of two on the previous year. Five cases—4 males and 1 female were admitted into Institutions 'under Order' during the year. Two were certified under the provisions of Section 5, two under the provisions of Section 8 and one under Section 3 of the Mental Deficiency Acts 1913-38. During the year 5 males and 2 females were discharged from Order and 1 male and 1 female died. Licence leave was granted to two male patients, making a total of 4 male patients on licence from institutions at the end of the year.

A survey of the cases awaiting admission into institutions at the end of the year showed that 31 cases were on the waiting list. Of these 15 were classified as urgent and the remaining 16 were deemed non-urgent. Details of these cases are given in the following table :

	URGENT				NON-URGENT			
	Under 16		Over 16		Under 16		Over 16	
	Male	Female	Male	Female	Male	Female	Male	Female
Cot and Chair	1	3	1	—	—	1	1	—
Ambulant								
Low Grade	3	3	2	2	—	2	8	—
Ambulant								
Medium Grade ..	—	—	—	—	—	3	1	—
	—	—	—	—	—	—	—	—
Totals	4	6	3	2	—	6	10	—
	—	—	—	—	—	—	—	—

GUARDIANSHIP

No change occurred during 1956 in the number of guardianship cases. Three adult female defectives remain with private guardians under the general supervision of the Brighton Society.

ASCERTAINMENT OF DEFECTIVES

The following cases were ascertained during 1956 :

	Male	Female
(1) Notified by the Local Education Committee		
under Section 57 (3) Education Act 1944	8	4
under Section 57 (5) Education Act 1944	2	8
(2) Other cases reported and ascertained ' Subject to be dealt with '	—	—
(3) Cases ascertained but not ' Subject to be dealt with ' ..	4	1
	—	—
Total	14	13
	—	—

Of the 27 cases ascertained, the majority were notified by the Local Education Authority.

SUPERVISION OF DEFECTIVES IN THE COMMUNITY

The following statistics relate to the number of mental defectives in the various classes who are subject to supervision as at 31st December, 1956 :

	Male	Female
Mental Defectives on Licence from Institutions	4	—
Mental Defectives under Guardianship	—	3
Mental Defectives ' Subject to be dealt with '		
(a) Statutory supervision	62	75
(b) Others	9	20
Mental Defectives not ' Subject to be dealt with '		
(a) Voluntary supervision	22	15
	—	—
Total	97	113
	—	—

With the exception of the three cases under the care of the Brighton Guardianship Society, the supervision of mental defectives in the community was carried out by officers of the local health authority. During the year 825 routine visits were made, as well as many additional special visits in connection with licence leave, holidays and renewal of detention orders. 27 cases granted holiday leave were conveyed from and to institutions. Of the cases supervised during the year, 3 left the area, 4 were admitted into institutions and, after careful and thorough investigation, 17 cases were removed from the register. This left a total of 210 cases under some form of supervision at the end of the year.

SHORT TERM CARE

Details of the nine cases admitted to institutions for short term care during the year were as follows :

					Male	Female
St. Catherine's Institution, Doncaster	..	..	..	..	-	2
Thundercliffe Grange, Rotherham	..	..	..	..	3	2
Oulton Hall Hospital, Leeds	..	..	..	..	1	-
Claypenny Colony, Nr. York	..	..	..	..	-	1
					—	—
					4	5
					—	—

OCCUPATION CENTRE

At the commencement of the year 30 pupils were attending the Centre. Two pupils were transferred to the Industrial Centre and one child left during the year and three new entrants were admitted to fill these vacancies. Attendance during 1956 totalled 10,062 half days out of a possible 11,726 which was equal to an average attendance of 85.8 per cent.

The Centre was visited on the 9th May, 1956, by an Inspector of the Board of Control who reported as follows :

“ Since the previous visit was paid to this Occupation Centre in February last year all the girls and boys over sixteen years of age have been transferred to the new Industrial Centre nearby. There are now 29 names on the roll, a decrease of nine and I understand there is no waiting list.

However, on the combined Industrial and Occupation Centre roll there is an increase of twenty-six names.

The removal of the old children has allowed for a much better classification. There are three groups as before (a) Nursery (b) Intermediate and (c) Senior

Work throughout is on a progressive basis and the standard obtained in each class is unusually high.

Discipline is excellent and it is doubtful whether the children differentiate work from play. A happy state reflecting much credit to the staff concerned. I was able to see a fair sample of the various forms of physical activities and the younger children gave a very good figure dancing display.

Singing is good for the grade of children attending, and in group recitation work it was obvious that much speech training is being given.

The needs of each child, I feel sure, are sympathetically considered by the Supervisor and her staff.

In this Junior Centre, Miss Kelford is assisted by Mrs. Crossley and two trainees—Mrs. Duffel and Miss Tarpy. They appear to work well together as a happy team.

Medical examinations are carried out yearly—the children can attend Ferham House Clinic for all Specialist Services.

Mid-day meals are sent in from the nearby School Kitchen. A good dinner was served to-day and for which the charge per head is very reasonable ”.

INDUSTRIAL CENTRE

When the year began, 33 pupils were attending the Centre and 2 pupils were admitted into institutions and one left. Two new entrants were admitted and two pupils were transferred from the Occupation Centre, making a total of 34 in attendance at the end of the year. Attendances during 1956 totalled 11,760 half days out of a possible 13,592, which was equal to an average attendance of 86.5 per cent.

The Centre was visited on the 9th May, 1956, by an Inspector of the Board of Control who reported as follows :

“ My visit to this Industrial Centre, opened only a year ago, was a very interesting one. The majority of boys and girls had not previously attended a Centre and the progress they have made in handwork and various forms of activities, such as dancing is remarkable and creditable to the staff concerned.

Attendance throughout the year has been very good. There are four groups—two male and two female, but this is not an attempt at classification proper as the majority of members are of the same mental grade. The grouping, however, does allow for instruction in special work, i.e. carpentry, basketry, stool seating, etc., to be given to a small group at a time. This method ensures that each boy spends regular periods in the wood work department and the girls either on domestic work, learning to use sewing machines and laundry work. It is hoped to start a cookery class in the near future.

Both girls and boys assist with domestic work under the direction of a member of the staff. Neither caretaker nor cleaner is employed.

Time Tables allow for plenty of indoor and outdoor activities

Miss Calam who is responsible for indoor activities discussed with me type of clothing most suitable for the girls and mention was made of the special kind of slip worn by members of the Older Girls' Centre at Leeds.

Mr. Wright, the wood work instructor, assisted by some of the boys has made a very substantial and useful work bench. Repairs to furniture of other departments are now being undertaken here and useful articles (i.e. shoe racks) for use in the Centre have also been made. It was suggested, when materials were available, that a show cabinet be made for both Centres. Also discussed with Miss Kelford were the advantages of bringing into use the small hand and face towel which can be discarded immediately.

During my visit I had the pleasure of meeting Dr. Donaldson, the Medical Officer of Health, and also Mr. Sidaway, Senior Mental Health Officer. Among various matters discussed were sheltered employment and the form of training most suitable for the adult defective.

Members of the Industrial Centre are fortunate in being able to attend the nearby Ferham House Clinic for treatment of minor ailments and Specialist Services.

Mid-day dinners are sent in from the nearby School Canteen. A good meal was served to-day and the supply adequate. Charges are very reasonable ”.

The present arrangements for the transport of pupils continues to operate satisfactorily and 57 of the 64 pupils are provided with transport. They are escorted to and from the Centres in the buses by members of the teaching staff working on a rota system. The mid-day meal at the Centres continued to be supplied by the School Meals Service and this system works extremely well. Five pupils at the Industrial Centre and two at the Occupation Centre receive free meals.

The open days for parents and friends were held on the 22nd November and 29th November. Both functions were extremely well attended and the continued improvement in the quality and workmanship of the goods offered for sale was evident. Progress has been made in all classes and it was a great pleasure to watch the nursery class give a display of balance and movement. The proceeds of the sale of work at the Occupation Centre amounted to £12 17s. 5d., and at the Industrial Centre to £61 10s. 0d., bringing the total of the sale of goods at both Centres to £144 6s. 1d for the year.

LUNACY ACT 1890 AND MENTAL TREATMENT ACT 1930

Co-operation between the Mental Health Service and general practitioners continues to be good and there is good liaison and co-operation with other sections of the health services.

The following table gives details of the cases investigated by the Duly Authorised Officers and their resultant action :

Number admitted into designated wards under Section 20,						
Lunacy Act 1890	..	..	..	..	..	59
Number not requiring further action	..	..	..	..	..	61 120
—						

Of the 120 cases dealt with by duly authorised officers, 26 occurred outside normal office hours.

In all, 13 admissions and re-admissions were certified under the provisions of Section 6, Lunacy Act and were admitted for hospital treatment, of which

- 4 cases had previously been in the designated wards and
- 9 cases had become certifiable whilst as voluntary cases in hospitals or admitted direct from the out-patients clinics.

97 cases were admitted as voluntary cases under Section 1 of the Mental Treatment Act 1930 of which

43 had previously been in the designated wards and

54 were admitted or re-admitted direct from the out-patients clinics.

OUT-PATIENT CLINICS

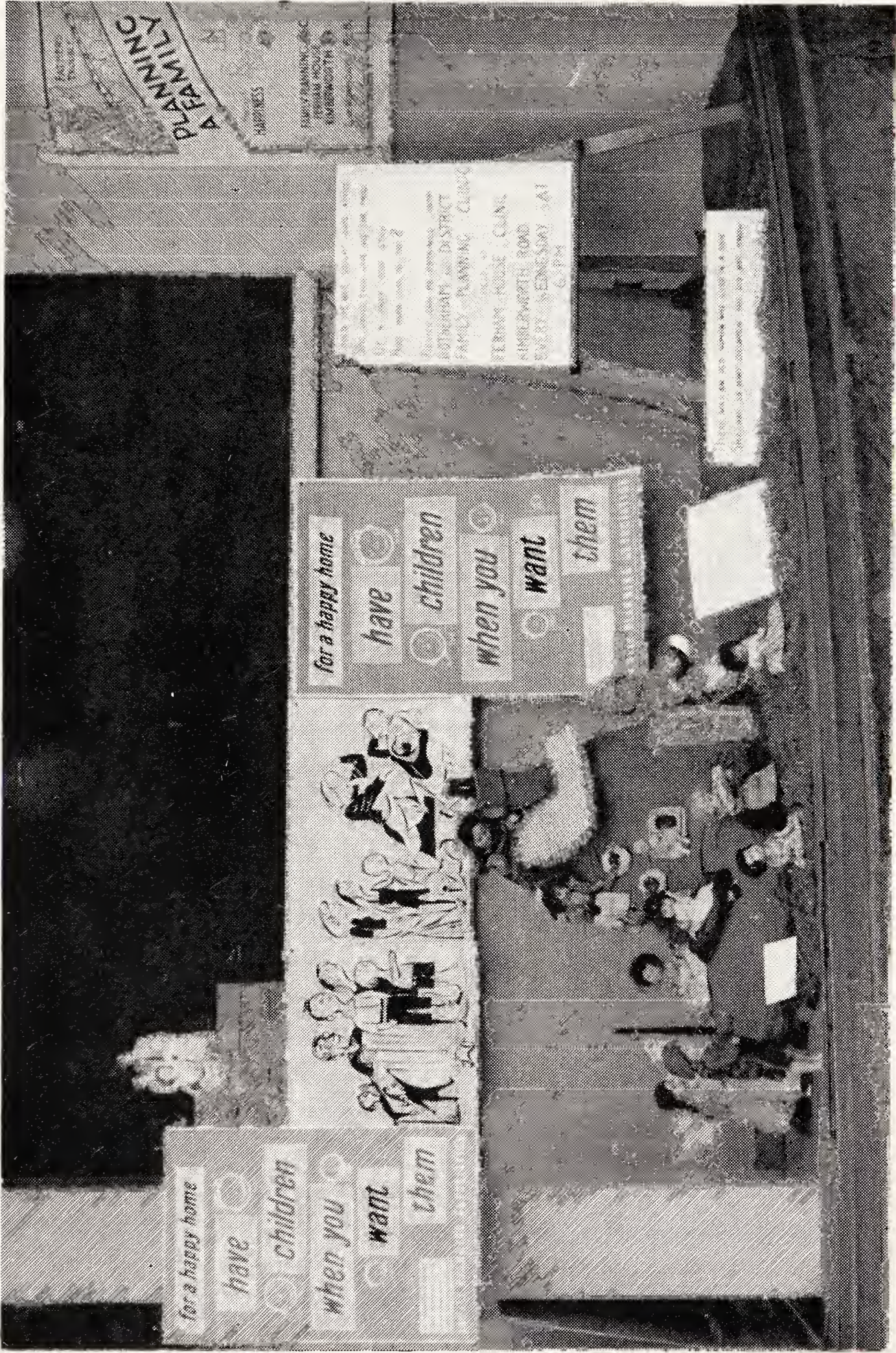
There are two psychiatric out-patient clinics held in Rotherham, and sessions are held weekly at the Doncaster Gate Hospital on Mondays and the Moorgate General Hospital on Wednesdays. Members of the mental health staff frequently attend the clinics and there is a free interchange of information.

The usefulness of the clinics to the community in the provision of early treatment cannot be doubted and a definite need is being met. Patients suffering from mild mental disorders are encouraged to take full advantage of the facilities available at the clinics. Every endeavour is made by the hospital staffs to accommodate the numerous cases referred, and little difficulty is experienced in securing a clinical appointment.

AFTER-CARE OF PATIENTS DISCHARGED FROM MENTAL HOSPITALS.

The necessity for regular visitation of persons discharged from hospital cannot be over-emphasized. The patient should be given every help in the early weeks following discharge, so that they may regain their confidence and continue to make progress towards recovery. The mental health officer dealing with such cases has a real part to play and much depends upon the assistance given in the way of helping the patient with problems which tend to increase anxiety and thereby impede progress or bring about relapse. For example, assistance in helping to complete forms or finding suitable employment—in short, sharing with him many of the everyday problems. Problems which present no difficulty to a fit person but which may be a source of worry to a patient recovering from mental illness.

The Mental Health Officer should not be restricted to the mere observance of his statutory duties, and at present he has little or no contact with the patient during hospitalisation. Much could be achieved if the officer was allowed to keep in touch with patients whilst they are in hospital. Attendance at hospital case conferences by these officers and their contact with the doctors would do much to give them a clearer picture of any special need or advice the patient may require after discharge. Again the Mental Health Officer has information about social background and family history which the hospital doctors could not readily obtain from other sources. Whilst a large proportion of after-care work continues to be carried out by the hospital psychiatric social workers, nevertheless the number of cases referred to the Local Health Authority continues to increase. During 1956, 53 cases were so referred and 152 visits were paid. At the end of the year 38 remained on the after-care register.



FAMILY PLANNING DISPLAY IN HEALTH SERVICE BUREAU WINDOW

WELFARE

In accordance with Circular 1/54 of the Ministry of Health dealing with the subjects for inclusion in the Annual Reports of Medical Officers of Health the following items are included: —

NATIONAL ASSISTANCE ACTS 1948 AND 1951

The Welfare Committee is responsible for the carrying out of the Council's Schemes under the above Act.

A joint sub-committee dealing with the Care of the Aged was formed in March, 1951, with three members each from the Health and the Welfare Committees of the Council. These are the Committee's Chairmen and Vice-Chairmen and one other member from each committee.

BLIND PERSONS

The number of blind persons registered in the Borough at 31st December, 1956, was 244. This was an increase of 2 from the previous year, and the following table gives details of the age and sex of the cases remaining on the register: —

Age groups	Males	Females	Total
Under 5 years	—	2	2
Over 5 years and under 16 years	2	2	4
Over 16 years and under 20 years	—	1	1
Over 20 years and under 30 years	3	1	4
Over 30 years and under 40 years	5	6	11
Over 40 years and under 50 years	15	9	24
Over 50 years and under 60 years	13	13	26
Over 60 years and under 70 years	19	19	38
Over 70 years	55	79	134
Totals	112	132	244

Details of the employability of the cases aged over 16 years are as follows: —

	Males	Females	Total
Employed	15	5	20
Trained, but unemployed	2	—	2
Training	1	—	1
Trainable	—	—	—
Unemployable	92	123	215
Totals	110	128	238

The following table gives details of the occupation of the persons employed or trained but unemployed:

Occupation	Employed		Trained, but unemployed	
	Males	Females	Males	Females
Basket maker	2	—	—	—
Braille copyist	1	—	—	—
Brush maker	3	—	1	—
Cleaner	—	2	—	—
Foster mother	—	1	—	—
Gardener	1	—	—	—
Knitter	—	2	—	—
Labourer	2	—	—	—
Mat maker	2	—	—	—
Mattress maker	1	—	—	—
Physiotherapist	1	—	—	—
Piano tuner	2	—	—	—
Poultry keeper	—	—	1	—
Totals	15	5	2	—

As in past years, each new case is examined by the Consultant Ophthalmologists Miss E. Hatherley or Mr. T. Stafford Maw and Form B.D.8 completed. Eighty-five reports on this form were received during 1956, 15 were received in respect of persons certified blind, 15 were partially sighted, 48 were re-examined and 7 were found not to be blind.

A study of these reports shows the following conditions obtained:—

Condition	Blind	Partial blindness	Re-examined	Not blind
Glaucoma	1	1	4	—
Cataracts	6	7	19	5
Diabetes	2	—	—	—
Myopia	1	1	5	—
Congenital Diseases and defects :				
Nystagmus	—	—	2	—
Retinitis Pigmentosa	—	—	1	—
Optic atrophy	1	—	4	—
Retinopathy	—	1	2	—
Macular Degeneration	2	—	5	—
Retinal Arterio Sclerosis	—	—	1	—
Urietis and Buerger's Disease	—	—	1	—
Choroidal Sclerosis	—	1	—	—
Aphakia	—	1	—	1
Central Choroid Degeneration	—	1	—	—
Choroidal Retinal Degeneration	—	—	1	—
Choroid Retinitis	—	—	2	—
Chronic Iridocyclitis	1	—	—	—
Disciform Degeneration	—	1	—	—
Keratitis	—	—	1	—
Retrolental Fibroplasia	1	—	—	—
Functional Amblyopia	—	1	—	—
Very slow cerebration	—	—	—	1
Totals	15	15	48	7

The following observations are made in amplification of the above table :

GLAUCOMA

One certified blind, one partially sighted, both requiring hospital supervision. Four re-examined, all requiring hospital supervision, one of which was certified not blind.

CATARACTS

Six certified blind, one requiring surgical treatment. Seven certified partially-sighted, one requiring optical treatment, three hospital supervision, two no treatment and one surgical treatment. Nineteen re-examined, five to have surgical treatment, one transferred to blind register requiring medical treatment and thirteen no treatment recommended. Five certified not blind, two requiring hospital supervision and three no treatment.

DIABETES

Two certified blind, both receiving medical treatment.

MYOPIA

One certified blind, no treatment recommended. One partially sighted, hospital supervision. Five cases re-examined, two transferred to blind register, two no treatment recommended and one requiring surgical treatment.

NYSTAGMUS

Two re-examinations, one de-certified, one requiring optical treatment.

RETINITIS PIGMENTOSA

One re-examination requiring optical treatment.

OPTIC ATROPHY

One certified blind, no treatment. Four re-examinations requiring no treatment, one being transferred to blind register.

RETINOPATHY

One partially-sighted, requiring medical treatment. Two re-examinations one receiving medical treatment, one hospital supervision.

MACULAR DEGENERATION

Two certified blind, no treatment. Five re-examinations, three transferred to blind register, one no treatment, one requiring hospital supervision.

RETINAL ARTERIO SCLEROSIS

One re-examination, no treatment recommended.

URIETIS AND BUERGER'S DISEASE

One re-examination, transferred to blind register and receiving medical treatment.

CHOROIDAL SCLEROSIS

One registered partially-sighted requiring medical treatment.

APHAKIA

Two cases examined, one partially sighted requiring hospital supervision, one not blind, no treatment recommended.

CENTRAL CHOROID DEGENERATION

One registered partially-sighted, hospital supervision recommended.

CHOROIDAL RETINAL DEGENERATION

One re-examination, no treatment recommended.

CHOROID RETINITIS

Two re-examinations, no treatment recommended in either case.

CHRONIC IRIDOCYCLITIS

One registered blind, under hospital supervision.

DISCIFORM DEGENERATION

One registered partially-sighted, hospital supervision.

KERATITIS

One re-examination no treatment recommended.

RETROLENTAL FIBROPLASIA

One registered blind, no treatment.

FUNCTIONAL AMBLYOPIA

One registered partially-sighted, medical treatment recommended.

VERY SLOW CEREBRATION

One examined, and certified not blind, no treatment recommended.

HANDICRAFTS AND HOME TRAINING

HANDICRAFTS

A weekly class is held for instruction in the following handicrafts :

Pulp cane work
Chair-caning
Seagrass weaving
Knitting

String bag making
Rug making
Leather work and lampshade making

The number of blind and partially sighted persons attending the classes varies from 10 to 24.

Individual instruction has been given in braille and moon type to all blind persons wishing for such instruction.

HOME WORKERS' SCHEME

No more blind persons have been incorporated in this Scheme.

One man certified blind has recently undergone rehabilitation training at Torquay with a view to being employed in open industry.

EPILEPTICS AND SPASTICS

The following cases of epilepsy are known to the Welfare Department :

INSTITUTIONAL :	Males	Females	Total
“ The Mount,” Rotherham			
(Part III accommodation)			
Rotherham cases 	2	2	4
West Riding cases	1	1	2
David Lewis Colony, Manchester	—	3	3
Maghull Homes, nr. Liverpool ..	1	—	1
AT HOME :			
On Handicapped Persons Register	9	6	15
	—	—	—
	13	12	25
	—	—	—

Five cases of cerebral palsy are also known to that department, and details of these are as follows :

INSTITUTIONAL :	Males	Females	Total
“ The Mount,” Rotherham			
(Part III accommodation)			
Rotherham cases 	1	1	2
West Riding cases	—	2	2
AT HOME :			
On Handicapped Persons Register	2	3	5
	—	—	—
	3	6	9
	—	—	—

All the cases resident in “The Mount” and at home are under the medical care of their own doctors.

COUNTY BOROUGH OF ROTHERHAM
(EDUCATION COMMITTEE)



REPORT
OF THE
PRINCIPAL
SCHOOL MEDICAL
OFFICER
FOR THE YEAR
1956

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ROTHERHAM EDUCATION COMMITTEE

as at 31st December, 1956

His Worship the Mayor (Councillor F. DAVIES)

Chairman : Councillor M. W. YOUNG

Vice-Chairman : Councillor J. R. MORAN

Alderman G. A. BARKER.

Alderman E. CRUIKSHANKS, J.P.

Alderman F. DUKE, J.P.

Alderman D. J. S. MEADOWS.

Alderman Mrs. F. L. GREEN, J.P.

Alderman Mrs. M. H. MOORHOUSE, J.P.

Alderman F. C. WOFINDEN.

Councillor W. BEEVERS.

Councillor A. E. BRADLEY.

Councillor T. A. COLLEY.

Councillor C. DUFFIELD.

Councillor Mrs. E. McNICHOLAS.

Councillor W. J. OWEN, J.P.

Councillor L. J. TARBIT, J.P.

Councillor A. WILDE.

Councillor P. C. WRIGHT.

Miss D. G. DEWAR, B.A., J.P.

Mr. T. W. EDWARDS, J.P.

Rt. Rev. G. V. GERARD, C.B.E.,
M.C., M.A.

Mrs. I. L. HABERSHON, J.P.

Very Rev. H. HAMMOND, V.F.

Rev. L. N. HOLDEN.

Director of Education :

R. BLOOMER, B.Com.

COUNTY BOROUGH OF ROTHERHAM.

GENERAL STATISTICS.

Population—Registrar General's estimate as at mid-year 1956	...	...	82,850
School population—December 1956, number on rolls	...	...	15,382
Area (acres)	...	...	9,255
Nursery Schools :			
Number of schools	...	...	1
Number of departments	...	...	1
Average number on roll	...	...	90
Primary Schools :			
Number of schools	...	...	19
Number of departments	...	...	38
Average number on roll	...	...	8,798
Secondary Schools :			
Number of schools	...	...	4
Number of departments	...	...	7
Average number on roll	...	...	3,643
Voluntary Schools :			
Number of schools	...	...	2
Number of departments	...	...	4
Average number on roll	...	...	680
Secondary Grammar Schools :			
High School for Girls—Number of pupils	...	...	515
Grammar School (Boys)—Number of pupils	...	...	509
Secondary Technical Schools :			
Oakwood Technical High School—Number of pupils—Boys	...	...	439
Girls	...	...	417
Special Schools :			
Newman Open Air School—Number of pupils	...	...	165
Grange Special School (Educationally sub-normal children)—			
number of pupils	...	...	126

STAFF

(as at 31st December, 1956)

Medical Officer of Health and Principal School Medical Officer:

R. J. DONALDSON, M.B., Ch.B., D.P.H.

Deputy Medical Officer of Health and Deputy Principal School Medical Officer:

W. J. CONNELLY, L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H.

Assistant Medical Officers of Health and School Medical Officers:

MARY D. BOYD, M.B., Ch.B.

EVELYN BOSTOCK, M.B., B.S., D.Obst., R.C.O.G.

T.M.B. ROHAN, M.B., B.Ch., B.A.O.

Principal Dental Officer:

H. R. HEALD, L.D.S.

Dental Officers:

JOAN H. EGAN, B.D.S.

G. W. LOWE, L.D.S.

L. F. T. LIANG, L.D.S. (*part-time*).

H. P. REDFEARN, L.D.S. (*part-time*).

J. LEESON, B.D.S. (*part-time*).

Speech Therapist:

ANNE D. M. LEE, L.C.S.T.

Physiotherapist:

Vacant (appointment made).

Educational Psychologist:

Vacant (appointment made).

Chiropodist (part-time):

L. ALDAM, M.Ch.S.

CONSULTING STAFF (*part-time*):

Ophthalmology:

T. STAFFORD MAW, M.B., Ch.B., D.O.M.S

FRANZISKA FISCHER, M.D.

Ear, Nose and Throat:

H. M. PETTY, M.B., Ch.B., D.L.O.

Psychiatry:

J. D. ORME, L.R.C.C., M.R.C.S., D.P.M.

Orthodontics:

J. H. GARDINER, B.D.S.

Orthopaedics:

H. L. McMULLEN, B.A., M.B., B.Chir., F.R.C.S.

Superintendent Health Visitor:

Miss E. G. TAYLOR.

Deputy Superintendent Health Visitor:

Miss C. M. WILKINSON

Health Visitor/Social Worker:

Miss M. J. CASEY.

Health Visitors/School Nurses:

Miss M. FLEMING.

Miss M. MYERS.

Miss N. B. GRIFFITHS.

Miss A. W. RITCHIE.

Miss E. M. JEFFS.

Miss T. SHANLEY

Miss E. KEETON.

Miss M. WILLIS.

Mrs. R. McHUGH (*part-time*).

Miss N. Y. WILSON.

School Nurses:

Miss C. H. CROFTON.

Miss G. K. CAVE.

Mrs. E. M. CATLEY.

Mrs. N. LLOYD.

Mrs. E. WARD.

Clinic Nurses:

Mrs. E. A. S. HOYLE.

Mrs. M. P. PHINN.

Mrs. R. JACKSON (*part-time*):

Clinic Assistants:

Miss E. M. NICKLIN.

Mrs. M. GLOVER.

Dental Attendants:

Miss W. HARTE.

Miss M. JONES.

Miss J. BURTOFT.

Miss J. STEVENSON.

Dental Technician:

D. LEE.

Lay Administrative Officer (Health Department):

G. E. WESTBY.

Clerical Staff:

Miss W. M. COOPER (*Senior Clerk*).

Miss D. HIBBERD.

Miss B. MEASURES.

Miss P. E. WOOD.

Mrs. N. ROPER (*nee Young*).

Miss M. WATERHOUSE.

Miss N. MALLEN (*Dental Clerk*).

HEALTH DEPARTMENT,
ROTHERHAM.

TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION COMMITTEE
OF THE COUNTY BOROUGH OF ROTHERHAM

I have pleasure in submitting the report of the work done by the School Health Service for the year 1956.

During the year Dr. J. D. Orme was appointed by the Sheffield Regional Hospital Board as part time Consultant Psychiatrist and allocated to the Rotherham Child Guidance Clinic for three sessions per week. His predecessor was only responsible for one session per week and the increase in the number of sessions has resulted in a very satisfactory solution to the problem of a long waiting list of children for treatment at this clinic.

This is the first year in which B.C.G. vaccination has been carried out in Rotherham throughout the full 13-14 years age group and it has been somewhat disappointing to find that only 61.1 per cent. of the parents of these children gave their consent to this vaccination. The report of the Medical Research Council (February 1956) quite clearly demonstrated that B.C.G. vaccination gives to the adolescent a very substantial degree of protection against tuberculosis. In view of this carefully controlled investigation I am sure that B.C.G. vaccination can be recommended with confidence to parents, and that the response in future will be greater. In these days of medical progress, one has a great deal of sympathy towards parents who may get the feeling that their children are being used as guinea pigs for an experiment. "After all," the parent says, "you want to vaccinate my child against smallpox just after its birth ; then when it is eight months old you say it should be immunised against diphtheria, and whilst that is being done, why not give it protection against whooping cough ? By the time it is five years old you tell me that it should have a booster dose to top up the diphtheria immunisation, and in the meantime you have asked me to agree to the course of injections against poliomyelitis which are being given to children between the age of 2 and 9 years. Then when our child reaches 13 years of age, you are after it again for B.C.G. vaccination against tuberculosis and this is followed by a request for chest x-ray when the Mass Radiography Unit comes ! ! Where is it all going to end ? " Yes, that is the position and the answer is very clear. The protections against the several diseases mentioned have all been thoroughly tested and proved, long before their introduction as routine public health measures. The reduction in ill-health, sickness, disease and death resulting from the protection gained, is amply worth while. In view of the results gained from the immunisation of children against these diseases, the stock answer "I don't believe in it" should no longer obtain. By the greater co-operation of parents, increased protection will be attained, and the sooner will come the day when these diseases are things of the past.

The fluoridation of water supplies with a concentration of about 1.0 parts per million reduces the incidence of dental caries to quite a considerable degree. The Principal School Dental Officer, in his report, comments on this fact. There is no great technical difficulty in introducing these measures. Unfortunately, there is a feeling amongst members of the general public that fluorine in this dosage can cause harm and it has also been condemned as "mass medication." Fluoridation of water supply has been generally accepted in the United States of America as a routine public health measure with no ill effects. It is true that high concentrations of fluorine can produce harmful symptoms, but in controlled amounts the results have a marked beneficial effect on the dental health of a community.

I would like to thank the members of the staff, without whose hard work and diligence this report could not have been written.

The work of the School Health Service depends for its smooth running to a very large degree on the co-operation of the Director of Education and his staff and the teaching staff in schools, and we have had their full support throughout the year.

On behalf of myself and members of the staff of the School Health Service I would like to express thanks to the Chairman and members of the Education Committee.

R. J. DONALDSON,

Principal School Medical Officer.

CLINICS AND TREATMENT CENTRES

The following is a list of the school clinics and treatment centres provided, together with the sessional times : —

Address of clinic and sessions held	Times of sessions
FERHAM HOUSE CLINIC, Kimberworth Road, Rotherham.	
Minor ailment, general inspection and treatment.	Mondays to Fridays, 9.0 a.m. to 12.30 p.m.; Saturdays, 9.0 a.m. to 12.0 noon. Medical sessions—Mondays and Fridays.
Ophthalmic.	Specialist's session — Tuesdays, 9.0 a.m. to 12.30 p.m. Nurses re-inspections—as required, Tuesdays, 2.0 to 5.0 p.m.
Ear, nose and throat.	Specialist's session—Tuesdays, 11.30 a.m. to 1.0 p.m. Nurses treatment sessions — Mondays to Fridays, 2.0 to 5.30 p.m.
Dental.	Mondays to Fridays, 9.0 a.m. to 12.30 p.m. and 2.0 to 5.30 p.m.; Saturdays, 9.0 a.m. to 12.0 noon.
Child guidance.	Psychariast—Tuesdays, 2.0 p.m. to 5.30 p.m. Thursdays and Fridays, 9.0 a.m. to 12.30 p.m. Educational Psychologist—Tuesdays, 2.0 p.m. to 5.30 p.m. Thursdays and Fridays, 9.0 a.m. to 12.30 p.m. Additional sessions arranged as required.
Chiropody.	Alternate Fridays, 9.0 a.m. to 12.30 p.m.
Speech therapy.	Mondays to Wednesdays and Fridays, 9.0 a.m. to 12.15 p.m. and 1.45 to 5.0 p.m. Thursdays, 9.0 a.m. to 12.15 p.m.
Immunisation.	Tuesdays, 2.0 to 4.15 p.m.
CRANWORTH ROAD CLINIC, Cranworth Road, Rotherham.	
Minor ailment, general inspection and treatment.	Mondays to Fridays, 9.0 a.m. to 12.30 p.m.; Saturdays, 9.0 a.m. to 12.0 noon. Medical sessions—Mondays and Fridays.
Orthopaedic.	Specialist's session—alternate Wednesdays, 2.30 to 4.30 p.m.
Ophthalmic.	Specialist's session — Saturdays, 9.0 a.m. to 12.0 noon. Nurses re-inspections—as required.

Address of clinic and sessions held	Times of sessions
Ear, nose and throat.	Specialist's session—Fridays, 10.45 a.m. to 12.30 p.m. Nurses treatment sessions — Mondays to Fridays, 9.0 a.m. to 12.30 p.m.; Saturdays, 9.0 a.m. to 12.0 noon.
Dental.	Mondays to Fridays, 9.0 a.m. to 12.30 p.m. and 2.0 to 5.30 p.m.; Saturdays, 9.0 a.m. to 12.0 noon.
Chiropody.	Alternate Fridays, 9.0 a.m. to 12.30 p.m.
Speech therapy.	Thursdays, 1.45 to 5.0 p.m.
Immunisation.	Wednesdays, 2.0 to 4.15 p.m.
THORPE HESLEY CLINIC, Thorpe Hesley Primary School, Upper Wortley Road, Rotherham.	
Minor ailment, general inspection and treatment.	Medical sessions — 2nd and 4th Tuesdays in the month, 2.0 to 5.0 p.m. Nurses treatment sessions —Fridays, 2.0 to 4.0 p.m.
Immunisation.	2nd and 4th Tuesdays in the month, 2.0 to 5.0 p.m.
GREASBROUGH CLINIC, Public Hall, Greasbrough, Rotherham.	
Minor ailment, general inspection and treatment.	Medical sessions—1st and 3rd Wednesdays in the month, 2.0 to 5.0 p.m. Nurses treatment sessions —Wednesdays, 2.0 to 4.0 p.m.
Immunisation.	1st and 3rd Wednesdays in the month, 2.0 to 5.0 p.m.
BLACKBURN CLINIC, Blackburn Primary School, Baring Road, Blackburn, Rotherham.	
Minor ailment, general inspection and treatment.	Medical Sessions—2nd and 4th Wednesday in the month, 2.0 to 5.0 p.m. Nurses treatment sessions— Wednesdays, 2.0 to 5.0 p.m.
Immunisation.	2nd and 4th Wednesday in the month, 2.0 to 5.0 p.m.



AUDIOMETER TEST BEING CONDUCTED IN A SECONDARY MODERN SCHOOL

Address of clinic and sessions held	Times of sessions
HIGH GREAVE CLINIC, High Greave Primary School, High Greave Road, East Herringthorpe, Rotherham.	
Minor ailment, general inspection and treatment.	Nurses treatment sessions—Monday and Fridays, 9.0 a.m. to 12.0 noon.
NEWMAN OPEN AIR SCHOOL, Whiston, Rotherham.	
Minor ailment, general inspection and treatment. Immunisation.	Medical sessions—Thursdays, 2.0 to 4.0 p.m. Nurses treatment sessions—Mondays to Fridays, 9.0 a.m. to 12.0 noon and 1.30 to 4.0 p.m. As required—at medical sessions.
ABBAY SPECIAL SCHOOL, Junior Department, Scholes, Rotherham.	
Minor ailment, general inspection and treatment.	Medical sessions—alternate Thursdays 2.0 to 4.0 p.m. Nurses treatment sessions—Mondays, 9.30 a.m. to 12.0 noon.
Senior Department, Kimberworth, Rotherham.	
Minor ailment, general inspection and treatment.	Medical sessions—alternate Thursdays, 2.0 to 4.0 p.m. Nurses treatment sessions—Tuesdays, 2.0 to 4.0 p.m.
REDSCOPE CLINIC, Redscope Primary School, Kimberworth Park Road, Rotherham.	
Minor ailment, general inspection and treatment. Immunisation.	Medical sessions—Wednesdays, 9.0 a.m. to 12.30 p.m. Nurses treatment sessions—Mondays and Wednesdays, 9.0 a.m. to 12.30 p.m. As required—at medical sessions.

SUMMARY OF WORK

A. Medical Officers at schools :								
Routine inspections in schools	...	...	...	...	...	...	...	4,442
Special inspections in schools	...	...	...	...	...	...	...	107
Re-inspections in schools	...	...	...	...	...	...	...	4,002
B. Medical Officers at clinics :								
Routine inspections of scattered homes and boarded-out children	...							173
Inspections at clinics	...	...	...	...	...	...	...	7,300
Re-inspection at clinics	...	...	...	...	...	...	...	3,646
Inspections under employment of children byelaws	...	...	...	...	...	...	...	146
Miscellaneous	...	...	...	...	...	...	...	284
C. Specialists at clinics :								
Special inspections at clinics	...	...	...	...	...	...	...	2,020
Re-inspection at clinics	...	...	...	...	...	...	...	3,359
D. Dental Officers :								
Routine inspections at schools	...	...	...	...	...	...	...	9,354
Special inspections (school children)	...	...	...	...	...	...	...	1,364
Special inspections (non-school cases)	...	...	...	...	...	...	...	724
Attendances for treatment (school children)	...	...	...	...	...	...	...	12,009
Attendances for treatment (non-school cases)	...	...	...	...	...	...	...	1,710
E. School Nurses :								
Visits to schools	...	...	...	...	...	...	...	1,347
Examinations for cleanliness in schools	...	...	...	...	...	...	...	57,767
Visits to homes	...	...	...	...	...	...	...	804
Treatment of minor ailments in clinics (school children)	...	...						21,937
								(pre-school children) 159
Treatment of aural defects in clinics (school children)	...	...						2,821
								(pre-school children) 135
F. Speech Therapist :								
Treatments for speech training (school children)	...	...						1,038
G. Chiropodist :								
Attendances for treatment (school children)	...	...						830
								(pre-school children) 3

MEDICAL INSPECTION

Periodic and special inspections were carried out as in former years. 4,615 children were medically examined compared with 5,530 in 1955.

Special and re-inspections totalled 20,864 against 26,506 in 1955.

These figures included children in the children's homes and boarded-out children.

FINDINGS AT MEDICAL INSPECTION

PHYSICAL CONDITION

The following table shows the classifications of children at the routine examinations.

No. of children examined		Satisfactory	Unsatisfactory
1956	5,530	99·09	0·91

HEIGHTS AND WEIGHTS

Random test samples of 50 children inspected at the larger schools and the actual number (if under 50 children inspected) at the other schools, revealed the following average heights and weights. Comparative figures are given for 1955.

Group	Entrants		Intermediates		Leavers	
	Height ins.	Weight lbs.	Height ins.	Weight lbs.	Height ins.	Weight lbs.
Boys—1956	42·98	44·23	55·75	80·99	63·75	107·90
1955	42·95	43·52	56·19	80·35	63·22	110·60
Girls 1956	42·75	43·11	56·42	81·56	61·72	107·75
1955	42·79	42·13	56·54	81·87	62·43	113·21

UNCLEANLINESS

The number of children found with vermin and/or nits during the year was 329 compared with 514 in 1955.

66 children were cleansed at the clinics compared with 63 in 1955.

VISUAL DEFECTS AND EXTERNAL EYE DISEASES

The ophthalmic and minor ailment clinics cater for the above conditions. Figures are given on page 15. Vision tests were carried out on 1,119 eight-year-old children, 45 of whom were referred for treatment and 75 kept under observation.

EAR, NOSE AND THROAT DEFECTS

Details are given on pages 16–19. Special and minor ailments clinics deal with these conditions.

ORTHOPAEDIC AND POSTURAL DEFECTS

Twenty-two sessions were held in Rotherham by the Orthopaedic Consultant. Further particulars are given on page 16.

HEART DISEASE

107 children suspected of suffering from heart disease were examined during the year compared with 123 in 1955.

TUBERCULOSIS

The Chest Consultant examined 71 school children during the year, two of whom were referred by school medical officers. Two cases of non-pulmonary tuberculosis were notified during 1956.

Reference will be found on page 40 of this report to action taken with regard to the examination of contacts of a teacher at one of the schools in the County Borough. All the children attending the school together with members of the staff were x-rayed and no abnormalities were found.

CLOTHING AND FOOTWEAR

No cases of poor or bad clothing and footwear were found during routine medical inspection, in 1955 one case of poor footwear was reported.

DUTIES OF SCHOOL NURSES

A summary of the work of the school nurses is given below :

Number of visits paid to schools :

Cleanliness inspections	...	...	...	...	612
Other purposes	...	...	...	...	735
Number of examinations of children for cleanliness	...				57,767
Number of children found with nits and/or verminous head					329
Number of examinations of such children	...	...			2,855
Numbers of verminous children cleansed at the clinic	...				66
Number of visits paid to homes	...	...	...	...	804
Number of treatments of minor ailments at clinics					
(school children)	...	...	...	...	21,937
(pre-school children)	...	...	...	...	159
Number of treatments of aural cases at clinics					
(school children)	...	...	...	...	2,821
(pre-school children)	...	...	...	...	135

MEDICAL TREATMENT

MINOR AILMENTS

A total of 5,233 minor ailments were dealt with during 1956, the figure for 1955 being 5,792.

SCABIES

Two cases of scabies were found in 1956 compared with 13 cases in 1955.

RINGWORM

One case of ringworm of the scalp was treated during the year, four cases of ringworm of the body were treated. The figures for 1955 being two cases of ringworm of the body only.

PAEDIATRIC CLINIC

As stated in previous reports, children are now referred direct to hospital for examination. This arrangement continues to work satisfactorily.

OPHTHALMIC CLINIC

Eighty-seven sessions were held during the year by the Ophthalmic Surgeon. The appended tables give an analysis of the work :

	Refractions		Re-inspections
	Cases	Spectacles prescribed	
School children	854	767	1482
Pre-school children	36	31	200
Totals	890	798	1682

The conditions found at the examinations were as follows :

	School children	Pre-school children
Emmetropia	56	—
Hypermetropia	281	5
Hypermetropic astigmatism	390	12
Myopia	361	3
Myopic astigmatism	51	1
Mixed astigmatism	141	7
Concomitant strabismus	80	41
Glioma	—	1
Cataract	1	1
Nystagmus	6	1
Referred for squint operation	20	—
Choroidal defects	2	—
Albinoism with nystagmus	2	—

ORTHOPAEDIC CLINIC

INSPECTIONS BY THE ORTHOPAEDIC CONSULTANT.

Twenty-two sessions were held by the Orthopaedic Consultant during the year.
Details are given below :—

				First inspections	Total inspections
School children	...	...	...	102	239
Pre-school children	...	...	...	35	74
				—	—
			Total	137	313
				—	—

EAR, NOSE AND THROAT CLINIC

The work of the clinic is summarised in the following tables :

						Ferham House	Cranworth Road	Total
1—Number of new cases examined by Aural Surgeon						271	280	551
2—Number of cases receiving treatment on 31/12/55								
who continued treatment in 1956	...	...	...	...	...	82	61	143
3—Number of attendances made by cases in :								
(a) Head 1	...	...	...	...	...	1958	2164	3122
(b) Head 2	...	...	...	...	...	654	821	1475
4—Number of Aural Surgeon's subsequent inspections :								
(a) Head 1	...	...	...	...	...	519	548	1067
(b) Head 2	...	...	...	...	...	208	200	408

Particulars of the conditions found and treated at the clinics are given in the following table :

					Ferham House	Cranworth Road	Total
Number of children who attended	...	...	...	...	353	341	694
Ear conditions—Suppurative	...	...	...	...	163	181	344
(a) Cured	...	...	...	...	87	93	180
(b) Improved	...	...	...	...	76	88	164
(c) Continuing treatment			...	...	76	88	164
Non-suppurative	...	...	...	...	85	44	129
(a) Cured	...	...	...	...	61	32	93
(b) Improved	...	...	...	...	24	12	36
(c) Continuing treatment			...	...	24	12	36
Nose conditions	...	...	...	...	45	49	94
Throat conditions :							
(a) Tonsils and adenoids advised operation	...		...	...	46	54	100
(b) Tonsils only advised operation		...	...	...	10	8	18
(c) Adenoids only advised operation		...	...	...	4	5	9

AUDIOMETRIC TESTING

The aural nurse examines the hearing of all children in school at the ages of 8 and 11 years with 2121 electric audiometer.

Eight-year-old children found to be deaf at the first test are re-tested to eliminate such factors as novelty, lack of concentration and nervousness.

Number tested	Deaf 1st test	Number re-tested	Total number deaf
3,251	308	126	221

Of the children tested the following analysis is made :

Group A	(-3 to 6 decibels)	...	6249	Normal ears.
Group B	(9 to 18 decibels)	...	199	Slightly deaf ears.
Group C	(21 to 30 decibels)	...	54	Partially deaf ears.

—————
Total 6502
—————

A further analysis is made of children with defective hearing in both ears :

Group B	...	...	...	...	27 children
Group C	...	...	...	...	5 children

TREATMENT

Children found to have defective hearing by the electric audiometer are examined by the Aural Surgeon.

The results of such examinations are shown as follows :

						Ferham House	Cranworth Road	Total
Children examined by Aural Surgeon	...	...	...	...	...	287	325	612
Defects :								
Chronic rhinitis	...	...	...	...	...	76	60	136
Chronic suppurative otitis media	...	...	...	...	...	11	16	27
Acute suppurative otitis media	...	...	...	...	...	10	22	32
Mild eustachian catarrh	...	...	...	...	...	59	98	157
Catarrhal otitis media	...	...	...	...	...	36	51	87
Wax	...	...	...	...	...	31	14	45
Foreign bodies	...	...	...	...	...	3	6	9
Referred for removal of tonsils and adenoids	...	...	...	...	...	18	25	43
Referred for removal of adenoids only	...	...	...	...	...	1	2	3
Nerve deafness	...	...	...	...	...	1	2	3
Referred for submucous resection	...	...	...	...	...	2	3	5
Referred for intranasal antrostomy	...	...	...	...	...	22	19	41
Referred for removal of tonsils only	...	...	...	...	...	6	4	10
No diagnosis	...	...	...	...	...	9	1	10
Aural polypus	...	...	...	...	...	2	2	4

These defects were treated and the children who were found to be deaf were re-examined for hearing loss.

The following table shows the result of treatment of children found to be deaf :

Number of children re-tested with electric audiometer after treatment	495
Number of children cured of deafness by treatment	...
Number of children with improved hearing after treatment	...
Number of children showing no improvement and recommended hearing aids	...

OPERATIVE WORK OF THE SURGEON

Number operated upon 200

Operations performed :

(a)	Tonsils and adenoids removed	...	...	...	...	...	125
(b)	Adenoids only removed	...	...	...	...	...	9
(c)	Tonsils only removed	...	...	...	...	...	1
(d)	Dissection of tonsils	...	...	...	...	...	10
(e)	Dissection of tonsil remains	...	...	...	...	...	3
(f)	Dissection of tonsils and adenoids	...	...	...	...	...	1
(g)	Submucous resection	...	...	...	...	...	2
(h)	Bilateral intranasal antrostomy	...	...	...	...	...	12
(i)	Right or left intranasal antrostomy	...	...	...	...	...	3
(j)	Intranasal antrostomy and tonsils and adenoids	...	...	...	...	...	10
(k)	Intranasal antrostomy and adenoids	...	...	...	...	...	10
(l)	Intranasal antrostomy and tonsils	...	...	...	...	...	2
(m)	Aural granulations	...	...	...	...	...	1
(n)	Submucous resection and intranasal antrostomy	...	...	...	...	...	3
(o)	Reopening of intranasal antrostomy	...	...	...	...	...	3
(p)	Submucous resection and caldwell luc	...	...	...	...	...	1
(q)	Tonsils and adenoids removed and tophi of left auricle	...	...	...	...	...	1
(r)	Exploration of antra and removal of adenoids	...	...	...	...	...	1
(s)	Investigation intranasal antrostomy	...	...	...	...	...	1
(t)	Submucous resection, intranasal antrostomy and removal of tonsils and adenoids	...	...	...	...	...	1

CHILD GUIDANCE CLINIC

REPORT OF THE CONSULTANT PSYCHIATRIST.

The Educational Psychologist, who had carried out a considerable amount of treatment as well as testing, moved to a new post in September, but another is taking up his work in January. The social work is carried out by two health visitors, who are seconded to the clinic. Although only one has had previous experience in child guidance techniques, it is an arrangement which seems to be working quite well, especially as they are both used to dealing with families in their own homes—an aspect of the work which I like to encourage.

Accommodation is provided in a house in the grounds of Ferham House Clinic and this gives a pleasant informal atmosphere. There is a very satisfactory playroom and sufficient rooms for interviewing.

The Speech Clinic is in the same building and relations with that department have been most cordial, with mutual benefit over problems of speech disorders in emotionally disturbed children.

It is not possible to give figures that are strictly comparable with those of previous years, as the information necessary has not always been fully recorded and the changes in staff have made its collection impossible.

The discharges are extremely high for several reasons. Many parents do not wish to continue treatment under new psychiatrist and psychologist (an understandable attitude in view of the very personal nature of the treatment). There was also some difference in emphasis in the methods used by Dr. Warnecke and myself and this resulted in some cases being closed soon after he left. Because of these artificial changes (not necessarily associated with changes in the cases themselves) no useful analysis of discharges can be made. It is certain though that the main emphasis was on improvement as many parents felt they could carry on without further treatment.

Two cases have been recommended for residential treatment in hostels for maladjusted boys and steps are being taken by the Education Department to find places for them.

I give herewith a summary of figures for the year :

Number of cases under treatment 1.1.56	...	...	45
Number of new cases seen during 1956	...	...	18
Number of cases discharged	...	...	38
Number of cases under treatment 31.12.56	...	...	25

New cases seen during 1956 :

Origin.

School Medical Officers	...	...	...	...	9
Other medical (Consultants, General Practitioners)					5
Children's Officer	...	...	...	...	2
Probation Officer (Juvenile Court)			...	...	2

Diagnosis.

Nervous reaction	...	...	...	...	...	8
Behaviour problems		...	...	...	...	7
Habit	...	...	...	...	...	2
Educational problems		...	...	...	...	1

DENTAL SERVICE

REPORT OF THE PRINCIPAL DENTAL OFFICER.

During the year there has been one staff addition—Mr. Leeson started as a part-time dental officer, doing five sessions per week on March 12th, 1956. The strength at 31st December, 1956, was therefore three full-time and three part-time dentists, or the equivalent of four and three elevenths full-time dentists, being an increase of 5/11ths from December 1955, and 8/11ths from December 1954. Rotherham is fortunate in being near a teaching dental hospital and newly qualified dentists from Sheffield University who live in the area are more ready to accept a post here and continue to live at home, rather than apply for a similar one with a more distant authority. It is also perhaps known to these people that the clinics in Rotherham are well equipped, and that there is little, if any, interference with their professional freedom. While naturally rejoicing that the local authority have well appointed clinics, and that these are better staffed than many areas, it should be appreciated that while it is the duty of the local authority to provide dental clinics and service, the exact interpretation of the meaning of this seems to vary considerably in different places. Since 1948 any child can obtain “free” dental treatment from a private dentist just as he can from the clinic, but, owing to the different methods of payment, i.e. from the National Health Service or the local authority respectively, it would seem that those authorities which are under-established and so of course understaffed, are, although complying with the letter of the law, actually obtaining much of the dental treatment required by their school children and priority classes from the National Health Service rather than their local rates. It must be extremely depressing to be employed by an authority which shirks its obligations.

During the year 4,792 children were treated in the clinics out of 8,029 who were referred for treatment at the school inspections—this being 60 per cent, the remaining 40 per cent. being those who do not get any treatment at all, or attend the private practitioners in the town. Of 10,718 inspected during the year, 8,029 were advised to get dental attention, i.e. 74 per cent. As was pointed out last year, this does not necessarily mean that the teeth are in a bad state generally, but that there is an incidence of dental disease *to some degree* in 74 per cent. of children. When fluoridation of the water supplies is accepted, i.e. the addition of fluorine up to 1 part per million, in those areas where the supply is deficient as in Rotherham, it will improve the structure of the calcified tissues in the teeth, and their resistance to the attacks of caries. This improvement will of course only be present in those teeth which calcify after the introduction of the added fluorine to the water supplies and will not effect at all the teeth already formed, so that the beneficial effects of fluoridation on the teeth will not be noticeable for some FEW years after its introduction. Since pilot experimental schemes are only now being carried out in various areas in Britain and these will of necessity be of some years duration, I personally can only hope that my successors will not have the overwhelming feeling as I have done and do, that their work is comparable to trying to empty the sea with a bucket.

The effects on the first dentition of fluoridation would be most marked in that, apart from cutting down the early loss of milk teeth, which should not in the case of molars be shed until 9-11 years of age, and so enabling the child to chew properly and obtain the maximum benefits from its food, the present day tendency for the second dentition to grow irregularly (so encouraging caries and paradontal disease) would be largely counteracted.

The appreciation of dental health has increased enormously during the past twenty or even the past ten years, and I think that the school dental service plays a big part in this education of the general population, especially so in an industrial area. For instance, one is nowadays being continually asked by parents and even children themselves if their teeth are "growing straight or do they want a brace ? " (this being their expression for an orthodontic appliance and not indicating that they imagine they are two teeth short), whereas years ago such irregularities were accepted as an unfortunate but natural state of affairs about which nothing could be done except by extractions and a denture. Similarly there are now very few parents who are so ignorant or bigoted that they refuse to allow their children to have their teeth filled. However, neither the fitting of an orthodontic appliance (especially of the "fixed" type) nor the completion of a satisfactory mouthful of fillings are done without the expenditure of some considerable time, which might average, say, three hours. Since either orthodontic or conservative treatment, or even both, are essential to many patients, and since neither are conditions which can be left to treat later without there being even more treatment and length of time required, without sufficient qualified staff one reaches a point where it is advisable to consider whether or not too much time is being devoted to one or the other. While it is probably preferable to have a crooked tooth which is sound through filling, rather than the same tooth in its correct position but carious, it is also true, that it is better still to have it both in alignment and repaired. Also the crooked tooth will probably cause decay in the adjacent teeth which would not have arisen had the tooth been moved into its proper position in the dental arch. It should also be remembered that a change of work is as good as a rest and that to go from extractions to fillings and to orthodontics is as much rest as a dentist, whether in private practice or local authority work, is likely to get in the present understaffed condition in the profession as a whole. When bleeding occurs from a tooth socket, after having stopped originally, it is quite upsetting and probably the parents first thought is to fetch the doctor. Under the National Health Service a fee is payable for this to the private dental practitioner who then reimburses the doctor. Cases arose in which the doctor claimed the fee from the local authority when the extraction had been done at the clinic. These are paid by the authority but it was thought a suitable time to introduce a leaflet, distributed at extraction sessions, giving advice on the after-care of sockets in general and particular advice for sockets which persisted in bleeding or in which bleeding recurred. The telephone number of the Principal Dental Officer is given with whom the parents are requested to get in touch *only* as a last resort. There were eleven such cases in the last ten months of the year and two of these were on the same night. The time required on these trips is usually one to one and a half hours, around midnight, but generally speaking one is not called out unnecessarily.

The number of school children inspected during 1956 was 10,718 compared with 9,665 in 1955, but even so five departments were not seen in the year. These had of course been inspected late in 1955 and will be seen again in the early weeks of 1957. Such routine inspections do at least inform the parents that some dental attention is advisable even though we have a waiting list for two months for filling appointments. The proportion of treatment to inspection sessions was 18 : 1 and during August, when the schools are closed, and a large proportion of the dental staff are also on holiday, there were 669 attendances made by 274 individuals for 209 fillings and 667 extractions.

During 1956, 388 school children had 699 x-ray films taken, and 33 maternity patients had 47 films taken.

The following table shows the details of the treatment given at the different clinics :

Clinic	Total atten- dances	No. of indiv- iduals treat- ed	Extractions		Fillings				Anaesthetics		Other opera- tions	No. of patients sup- plied with dentures
			Perm. teeth	Temp. teeth	Perm. teeth		Temp. teeth		Local	Gen- eral		
					No. of fill- ings	No. of teeth filled	No. of fill- ings	No. of teeth filled				
Cranworth Road ..	5951	2583	1812	3826	1840	1540	67	63	554	2390	2455	98
Ferham House	7768	2933	2380	4514	1875	1561	39	36	592	2668	3667	145
Total 1956 ..	13719	5516	4192	8340	3715	3101	106	99	1146	5058	6122	243
Total 1955 ..	12788	5242	3809	7756	3499	3048	76	75	932	4856	6164	217

The following table gives details of treatment for the different groups of patients :

Group	Total attend- ances	No. of indiv- iduals treated	Extractions		Fillings				Anaesthetics		Other opera- tions	No. of patients sup- plied with dentures
			Perm. teeth	Temp. teeth	Perm. teeth		Temp. teeth		Local	Gen- eral		
					No. of fill- ings	No. of teeth filled	No. of fill- ings	No. of teeth filled				
School children..	12009	4792	2928	7568	3505	2912	85	79	1063	4462	5129	95
Pre-school children..	416	334	—	772	—	—	21	20	—	348	57	—
Maternity ..	1294	390	1264	—	210	189	—	—	83	248	936	148
Total 1956..	13719	5516	4192	8340	3715	3101	106	99	1146	5058	6122	243
Total 1955..	12788	5242	3809	7756	3499	3048	76	75	932	4856	6164	217

The following table gives the details of the work done in the dental laboratory :

Technician's half-day sessions	...	...	...	...	516
Full upper and lower dentures	...	...	Maternity	...	58
			Schools	...	1	
Full upper and part lower dentures	...	...	Maternity	...	20
Full upper or full lower dentures	...	...	Maternity	...	10
Part upper and part lower dentures	...	...	Maternity	...	17
			Schools	...	3	
Part Dentures	Maternity	...	43
			...	Schools	...	91
Relines and repairs to dentures	...	...	Maternity	...	13
			Schools	...	6	
Jacket or post crowns	Maternity	...	2
			...	Schools	...	9
Inlays	Schools	...	1
No. of orthodontic patients	...	...	Schools	...	360
No. of orthodontic appliances made						
(fixed and removable)	...	...	Schools	...	415
No. of orthodontic appliances repaired			Schools	...	18	
No. of study models made	281
Fixed appliances	—	Johnson twin arch	...	...	5
		Fixed tongue barrier	...	...	1
		Lower lingual bow	...	...	33
		Upper pin and tube	...	...	2
		Local pin and tube	...	...	7
		Edgewise arch	...	...	1
Removable appliances	—	Oral screen	...	...	4
		Schwartz plate	...	...	141
		Propulsor	...	...	25
		Norwegian plate	...	...	11
		Tongue barrier plate	...	...	8
		Badock expansion plate	...	...	19
		Finger spring plate	...	...	60
		Rat trap plate	...	...	46
		Canine retraction plate	...	...	27
		Inclined planes	...	...	10
		Sved plates	...	...	1
		Space maintainers	...	...	3
		Retention plates	...	...	11

CHIROPODY CLINIC

REPORT OF THE CHIROPODIST.

During the year fifty-two weekly sessions were held and attendances were well maintained. All children attending were referred by school medical officers and 830 treatments were given to 432 school children.

As always in the chiropodial treatment of children, the predominating condition is verrucae pedis plantaris and 341 cases accounted for 729 treatments. The technique used at the clinic gives very quick results and the average treatments per case is 2.14 per cent. These cases were all discharged cured.

Parents frequently ask what steps they can take to prevent children from catching these lesions. Unfortunately there is nothing that parents can do to either prevent or cause verrucae but they can, by frequent examination of their children's feet, bring the child to the clinic for examination immediately that any little bump or blister type of excrescence is found on the foot. This would ensure that verrucae was treated in the early stages instead of, as so very frequently happens, waiting until a number of large growths and the consequent pain impels the child to seek treatment. Parents can also make sure that their children's shoes are free from protuding nails on the inside.

Helomata accounted for 55 children being given 60 treatments. Corns are caused by friction and intermittent pressure and most cases attending the clinic were caused by the rapid growth of young feet outgrowing their shoes, although in a few cases teenage girls were wearing shoes very unsuitable for young feet.

Nail conditions—eleven children were seen and a total of 14 treatments cleared up all these conditions. Ingrowing toe nails are always caused by incorrect cutting and when parents attend with their children guidance is given in these matters. Three cases only attended wearing shoes very much too small.

Three cases were referred to the Orthopaedic Surgeon. Only 18 children failed to attend after appointments had been made for them.

Three pre-school children were treated for nail conditions and were corrected.

The appended table gives an analysis of the work :

Defects	School children		Pre-school children	
	Cases	Attendances	Cases	Attendances
Verrucae	341	728	—	—
Helomata	55	60	—	—
Nail conditions	11	14	3	3
Callosities	8	8	—	—
Hallux valgus	2	2	—	—
Flexed digits	2	2	—	—
Bursitis	4	5	—	—
Pronation	2	2	—	—
Strained fascia	3	5	—	—
Miscellaneous	4	4	—	—
Total	432	830	3	3

CLINIC SUMMARY

The following table summarises the work done at the several school clinics during the year :—

Work undertaken	Ferham House		Cranworth Road		Thorpe Hesley		Greasbrough		Newman Open Air School		Blackburn		Abbey Special School		High Greave Road		Redscope School		Totals					
	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances	School cases		Non-School cases		All cases	
																			Cases	Attendances	Cases	Attendances		Cases	Attendances	Cases	Attendances
Minor ailment and general	2371	7713	3276	7779	136	652	11	14	811	4143	117	582	108	400	397	2178	122	167	7300	23469	49	159	7349	23628
Orthopaedic	—	—	137	313	—	—	—	—	—	—	—	—	—	—	—	—	—	—	102	239	35	74	137	313
Ophthalmic	497	1388	393	1184	—	—	—	—	—	—	—	—	—	—	—	—	—	—	854	2336	36	236	890	2572
Ear, nose and throat	403	3508	365	3807	—	—	—	—	—	—	—	—	—	—	—	—	—	—	694	7072	74	243	768	7315
Dental ..	2933	7768	2583	5951	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4792	12009	724	1710	5516	13719
Child guidance	104	918	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	63	658	41	260	104	918
Chiropody	204	418	231	415	—	—	—	—	—	—	—	—	—	—	—	—	—	—	432	830	3	3	435	833
Speech therapy	108	883	22	165	—	—	—	—	—	—	—	—	—	—	—	—	—	—	130	1048	—	—	130	1048
Employment	94	94	42	44	—	—	—	—	1	1	—	—	—	—	—	—	—	—	137	139	—	—	137	139
Total	6714	22690	7049	19658	136	652	11	14	812	4144	117	582	108	400	397	2178	122	167	14504	47800	962	2685	15466	50485

INFECTIOUS DISEASES AND IMMUNISATION

The appended table gives the numbers of the common infectious diseases in children between the age of 5 and under 15 years and shows the quarterly distribution of the cases. The totals for all ages are also given.

Disease	Cases occurring in 1956				Total 1956	Total all ages 1956
	1st quarter	2nd quarter	3rd quarter	4th quarter		
Acute encephalitis :						
Infective	—	—	—	—	—	—
Post infectious	—	—	—	—	—	—
Acute poliomyelitis :						
Paralytic	—	—	—	—	—	—
Non-paralytic	—	—	—	—	—	—
Diphtheria	—	—	—	—	—	—
Dysentery	4	8	96	4	112	174
Encephalitis lethargica	—	—	—	—	—	—
Erysipelas	—	—	—	—	—	6
Food poisoning	—	20	2	1	23	48
Measles	—	—	2	1	3	21
Meningococcal infection	—	1	—	—	1	3
Pneumonia	1	—	—	2	3	32
Scarlet fever	24	13	13	11	61	80
Typhoid and paratyphoid fevers	—	—	—	—	—	—
Whooping cough	5	9	26	2	42	93
Tuberculosis :						
Respiratory	—	—	—	—	—	59
Other forms	2	—	—	—	2	6

DIPHTHERIA IMMUNISATION.

During the year, 128 school children received primary immunisation and 476 received booster injections.

At the end of the year 10,793 children between the ages of 5–14 years had been immunised. Of these, 5,858 had been immunised or received booster doses during the past five years.

No case of diphtheria has been reported in the County Borough since March, 1952.

NURSERY SCHOOLS AND CLASSES

No new nursery school or class was opened during the year.

Number of visits paid to nursery school and classes	...	...	...	75
			Boys	Girls
Number of examinations of children for cleanliness	...	1548	1519	
Number of new children found with verminous head	...	4	5	
Number of examinations of children with verminous head	...	5	9	
Number of new children found with nits	...	12	14	
Number of examinations of children with nits	...	19	42	
Number of children referred to minor ailment clinics	...	8	2	

HANDICAPPED PUPILS

The ascertainment and care of the handicapped children residing within the County Borough continues within the framework of the Education Act, 1944, and the School Health Service and Handicapped Pupils Regulations, 1953.

The following table shows the number of handicapped pupils of the various categories on the register at 31st December, 1956 :

	In Residential Special Schools	In Day Special Schools	In Ordinary Day Schools	Not at school	Total
Blind	2 (2)	— (—)	— (—)	2 (—)	4 (2)
Partially sighted	— (—)	6 (10)	1 (—)	— (—)	7 (10)
Deaf	9 (9)	— (—)	— (—)	— (—)	9 (9)
Partially deaf	2 (2)	— (—)	2 (4)	— (1)	4 (7)
Educationally sub-normal	4 (3)	111 (125)	82 (84)	— (—)	197 (212)
Epileptic	— (—)	2 (2)	— (1)	— (—)	2 (3)
Maladjusted	— (1)	— (—)	3 (5)	— (—)	3 (6)
Physically handicapped ..	6 (6)	31 (25)	3 (5)	6 (5)	46 (41)
Speech defects	— (—)	— (—)	70 (71)	— (—)	70 (71)
Delicate	— (1)	121 (135)	— (11)	— (—)	121 (147)
Multiple defects	1 (2)	6 (6)	— (1)	— (—)	7 (8)

The figures in brackets indicate the number on the register at 31st December, 1955.

BLIND PUPILS.

Two boys remain at the Sheffield School for Blind Children, a girl left Condover Hall for Blind Children, Shrewsbury, in December 1956. This girl was also educationally subnormal and it was considered that no further progress could be made in her education. The parents accordingly asked for her to be returned home.

PARTIALLY SIGHTED PUPILS.

No partially sighted pupils were admitted to the Newman Open Air School during the year, the total number of partially sighted pupils attending there is now six. Four children left the school during 1956. The maximum use is made of specialised apparatus as visual aids for these children by the Headmaster.

DEAF PUPILS.

Seven deaf pupils remain in the Yorkshire Residential School for the Deaf, Doncaster. Two children continue as deaf pupils at the Maud Maxfield Special School for the Deaf, Sheffield. No admissions were made during the year.

PARTIALLY DEAF PUPILS.

Two pupils remain in the Yorkshire Residential School for the Deaf, Doncaster.

EDUCATIONALLY SUB-NORMAL PUPILS.

During the year all the cases of educationally subnormal pupils due for re-examination in the ordinary day class within the County Borough, were reviewed and each case discussed individually with the Head Teachers. As a result of these interviews several cases were brought forward for ascertainment and in many cases the Head Teacher considered that the child was making satisfactory progress. In any case of doubt the child was specially tested. It is felt that this type of review will ensure maximum advantage to the child's education. Selection of cases for the Abbey Day Special School still requires care to use the school to the best advantage. During the year 114 children were examined in respect of educational subnormality. The following recommendations were made :

	1956	1955
Special day school	18	29
Special class for retarded pupils in ordinary day school ...	22	25
Further observation in ordinary day school	31	34
Remain at special day school	7	18
Reported to Local Authority as ineducable	12	5
Reported to Local Authority as requiring statutory supervision after leaving school	11	8
Examined prior to leaving special day school—no supervision required	11	—
Recommended for transfer from special day school to ordinary school	1	—
Referred to Child Guidance Clinic as maladjusted	1	—

Two boys remain as boarders at the Rossington Hall Special School for Educationally Subnormal Pupils, Rossington, Nr. Doncaster. Another boy aged eleven years remains at the Howard Home Special School, Bedford, and one girl was admitted to Thingwall Educationally Subnormal School, Liverpool, in February 1956. This girl had attended the Abbey Special Day School on a temporary basis until a vacancy was found.

ABBEY SPECIAL SCHOOL

During the year there were twenty-three new admittances to the school, 15 to the junior department at Scholes and 8 to the senior department at Kimberworth.

The following children left school during the year :

Boys : 8 on reaching the age limit of 16 years.

1 on reaching the age of 15 years as it was felt he had reached his educational limit.

1 a borderline case—after several years attendance at the school was reported to be making no progress. On re-ascertainment he was found to be ineducable and was notified to the Local Health Authority under Section 57(3) of the Education Act, 1944.

3 transferred to Secondary Modern Schools.

1 left the district.

Of the age leavers 2 were notified to the Local Health Authority under Section 57(5) of the Education Act, 1944, as requiring care and supervision.

Girls: 10 on reaching the age limit of 16 years.

2 on reaching the age of 15 years as it was felt they had reached their educational limit.

1 transferred to a Residential Special School.

2 left the district.

Five of the age leavers were notified to the Local Health Authority under Section 57(5) of the Education Act, 1944, as requiring care and supervision.

The school was full to capacity from January to July 1956 but from September to December there were some vacancies in the junior department.

The Youth Employment Officer has supplied some interesting information about those children who left school during 1956.

Of the nine boys who left, 6 obtained jobs and are holding them down. One boy after three months in a job was put off as physically unsuited and was admitted to the Industrial Rehabilitation Centre at Handsworth, Sheffield. One boy left the district and one boy failed to hold two jobs for 4 days and 1 day respectively.

Of the 12 girls who left, 7 appear to have found satisfactory jobs. One girl is attending the Occupation Centre and one, the eldest of a large family, has evidently not attempted to find work outside the home. Of the remaining three we have no record.

I think that, considering the limited capacity of these children, this is a satisfactory report.

EPILEPTIC PUPILS.

No admissions to special residential schools were made during the year.

MALADJUSTED PUPILS.

One boy was admitted to the Wennington Hall Special Residential School for Maladjusted Boys, Hornby, Lancashire, in January, 1955 and left in July, 1956. This boy was committed to an approved school.

PHYSICALLY HANDICAPPED PUPILS.

One girl attending Frodsham Hostel for Diabetic Children, Cheshire, left in July, 1956, having made satisfactory progress. She is now attending the Newman Open Air School and is expected to be transferred to an ordinary school in the Borough shortly. Another diabetic child is now attending ordinary school.

One boy aged 10 years was admitted to Dr. Barnardo's Village Home, Barkingside, Essex, in January 1956 and was transferred to the Ian Tetley Residential School, Killinghall, in March 1956, to be nearer his home.

PUPILS SUFFERING FROM SPEECH DEFECT.

Reviewing the cases treated during the past year it is noticeable that only a certain percentage can be treated as specific and isolated speech disturbances.

Speech is integrated with and dependant upon the emotional and educational levels attained and frequently reflects disturbances of the former. The patient must therefore be considered and treated as a whole and information concerning his school and home environment obtained. May I take this opportunity of thanking all other members of the health service and school staffs for their invaluable help in this respect.

It has been found useful to compile a list of "suspended" cases. These children are temporarily discharged but reviewed at certain intervals to ensure that good speech is being maintained. After a period of satisfactory probation they are ultimately discharged.

CASES AND ATTENDANCES.

Total number of cases treated	...	...	...	...	130
Total number of cases discharged	...	...	...	...	45
Total number of cases suspended (conditional discharge)	...				15
Total number of cases referred	...	...	...	...	76
Total number of attendances made	...	...	...	...	1048

DETAILS OF DISCHARGES.

Number refusing treatment	...	...	...	...	2
Number maximum improvement	...	...	...	...	2
Number cured	...	...	...	...	38
Number left district	...	...	...	...	3
Number conditionally discharged	...	...	...	...	15
					—
Total					60

TYPES OF DEFECTS TREATED.

Stammer	...	...	...	...	...	...	25
Stammer and dyslalia	...	...	...	...	...	...	6
Dyslalia	...	...	...	...	...	...	71
Interdental sigmatism	...	...	...	...	...	...	3
Gutteral sigmatism	...	...	...	...	...	...	1
Lateral sigmatism	...	...	...	...	...	...	4
Nasal sigmatism	...	...	...	...	...	...	1
Cleft palate	...	...	...	...	...	...	8
Hyper-hyponasality and dyslalia	...	...	...	...	...	...	5
Spastic dysarthria	...	...	...	...	...	...	4
Delayed speech development	...	...	...	...	...	...	2
							—
Total							130

CASES REFERRED FOR OTHER TREATMENT.

Child guidance	...	...	...	...	...	...	1
Orthodontic	...	...	...	...	...	...	2
Ear, nose and throat	...	...	...	...	...	...	2

NEWMAN OPEN AIR SCHOOL

The following table records details of admissions and discharges during 1956 :

	Epileptic		Delicate		Physically handicapped		Partially sighted		Total
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	
On register 1st January, 1956	—	2	73	62	13	12	6	4	172
Admitted 1956	—	—	15	8	4	3	—	—	30
Discharged 1956	—	—	18	18	2	2	2	2	44
Remaining on register at year end	—	2	70	52	15	13	4	2	158
On waiting list at year end ..	—	—	—	—	2	1	1	—	4
Ascertained in 1956	—	—	8	4	5	3	1	—	21

In the 1949 annual report of the School Medical Officer it was noted that no teaching provision for the age group 5-7 years was available. With the full co-operation of the Education Committee and the Headmaster, Mr. J. F. Herring, a start was made by the provision of a class for 6-7 year old children. This made very good progress and it is hoped that during next year a class for 5 year olds can be started.

SWIMMING CLASS.

A successful innovation during the year was the special swimming class for the children and they have taken to this as the proverbial ducks take to water. A special medical review was made of each child's case before allowing the child to attend for swimming lessons. They have made excellent progress and it is hoped to expand the numbers obtaining this valuable form of therapy during 1957. Of particular interest was the large number of asthmatic children requesting permission to attend the swimming classes.

NUTRITION.

An attempt was made during the year to measure the nutritional index of the children by means of screen testing them for haemoglobin content of the blood. The results are incomplete as yet, but so far no child has shown any indication of anaemia.

SUMMER CAMP.

In July a party of 18 children with two members of staff spent five days at Ilam Hall Youth Hostel in Derbyshire. The children were subjected to a thorough medical examination before being chosen and there was therefore some difficulty in making up the party. Those children going, however, had a most useful and enjoyable time and came back looking fit and well.

TREATMENT.

The following treatment was carried out during the year :

	Total Treatments			
Postural drainage	1,166
Breathing exercises	13,200
Ultra violet light and irradiation	12,800
Aerosol inhalations	1,166

THE MEMORIAL TO MR. CHILD.

The work on the memorial garden to Mr. W. H. Child, first headmaster of the Newman Open Air School, was completed in November. Because of the tremendous response from old pupils and parents it was possible to erect a sundial in Portland stone, with a surrounding path of York stone, the whole being set in a beautiful rose garden.

CARE AND AFTER-CARE OF HANDICAPPED PUPILS.

The Youth Employment Service contrives to give maximum support to the co-operation of parents in aiding the children leaving school to find most suitable employment. The following table indicates the employment taken up by school leavers from the Newman Open Air School during 1956.

Boys	Wagon repairing ...	...	1	Girls	Junior clerk ...	...	2
	Stores assistant ...	...	1		Shop assistants ...	...	2
	Gardener's assistant ...	...	1		Packers ...	...	1
	Factory worker ...	...	1		Lift attendant ...	...	1
	Van boy ...	...	1		Canteen assistant ...	...	1
	Trainee welder ...	...	1		Seamstress ...	...	1
	Referred to Industrial Re-						
	habilitation Centre for						
	assessment ...	...	2				
			—				—
			Total 8				Total 8
			—				—

HOME TUITION

Three children were receiving home tuition at the end of the year, with the following defects : severe crippling following poliomyelitis, chronic nephritis and congenital heart disease. The home teacher has given satisfactory reports on all these children.

SCHOOL PREMISES

No new schools were opened during 1956.

CHILDREN'S HOMES AND BOARDED OUT CHILDREN

MEDICAL RESPONSIBILITY.

On admission to one of the Corporation's Homes all children are examined by a school medical officer and they are also examined on discharge from the Home. Children who are to be boarded-out are also medically examined and a certificate of fitness is issued to the Children's Officer.

The general medical services were carried out, as in previous years, by a private medical practitioner.

CHILDREN'S HOMES.

122 children were seen during the year for periodic medical inspection and 140 examinations made. Treatment and tonics were prescribed where necessary.

Twenty-three admissions to hospitals for various complaints were made during 1956, eleven to Lodge Moor Infectious Diseases Hospital, Sheffield, five to Rotherham Hospital, three to the Moorgate General Hospital, Rotherham, two to Children's Hospital, Sheffield, one to Mexborough Montague Hospital and one to Kendray Hospital, Barnsley.

The general health of the children continues to be satisfactory.

BOARDED-OUT CHILDREN.

Fifty-one boarded-out children were examined during 1956 and 55 examinations made. Tonics were prescribed where necessary and defects found were accorded appropriate treatment.

MISCELLANEOUS MEDICAL EXAMINATIONS

CHILDREN AND YOUNG PERSONS ACT

Fifteen children were examined during the year prior to their admission to a remand home or approved school.

EMPLOYMENT OF CHILDREN

During the year 132 boys and 4 girls were granted certificates of fitness for employment. The figures for 1955 were 140 and 9 respectively. One boy was examined and found to be unsuitable for employment.

Nine girls were granted certificates of fitness to take part in stage entertainments compared with 4 girls in 1955.

COLLEGE ENTRANTS

During the year 47 candidates for admission to various training colleges were examined by school medical officers. All candidates were found to be medically fit for admission.

SCHOOL LEAVERS

During 1956, a total of 1,140 children attained school leaving age. With the co-operation of the Health Executive Council, a precis of the child's school medical history was sent to the family doctor of each child. This precis, printed on both sides of good quality paper measuring $6\frac{1}{2}$ by $4\frac{1}{2}$ inches, fits easily into the doctor's medical record envelope and on completion is sent to the office of the Executive Council to be forwarded to the appropriate general practitioner. The doctor's name is added prior to distribution by the staff of the Executive Council. A valuable background of the child is therefore being supplied to the family doctor by this excellent example of the liaison between the two bodies. Details of the form are reproduced in condensed form overleaf :

COUNTY BOROUGH OF ROTHERHAM—SCHOOL HEALTH SERVICE

MEDICAL REPORT ON PUPIL ABOUT TO LEAVE SCHOOL

Surname Born / /19
Christian names
Address
School
Family doctor
Date of last school inspection / /19

NO DEFECTS FOUND UNLESS RECORDED BELOW

EYES Vision without glasses R. L.
Vision with glasses R. L.
Colour vision
Other
EARS Hearing
Otitis media
Other
HEART
CHEST

The reverse side of the form is as follows :

ORTHOPAEDIC

OTHER DEFECTS

B.C.G. IMMUNISATION

Pre-Vaccination Positive/Negative on / /19
B.C.G. given on / /19
Post Vaccination
Conversion/No Conversion on/ /19

NOTES (including advice re employment)

R. J. DONALDSON,
Principal School Medical Officer.

.....195.....

It will be noted that the precis work is cut down to a minimum by the statement “NO DEFECTS FOUND UNLESS RECORDED BELOW” and that ample room is given for the addition of special information under the heading “NOTES.”

B.C.G. VACCINATION

A full scheme was commenced during 1956 and B.C.G. (Bacillus, Calmette, Guerin) vaccination was offered by the Local Health Authority to all school children in the 13 to 14 year old groups as the young adolescent is the group at greatest risk of infection by the tubercle bacilli in the community. The acceptance rate for this age group was 61.1 per cent.

The help given by many head teachers of the schools visited, who gave talks at school assembly, prior to their vaccination, was amply rewarded by a high acceptance rate in these schools.

Arrangements were made to have the necessary equipment packed in sterilised drums and the tests were performed by a school medical officer assisted by a small team of nurses. The intradermal method was used and no abnormal reactions were noted in any of the children vaccinated.

The general procedure adopted following the receipt of the parents consent was for the children to be given a Mantoux test. This was performed on a Monday and the test read the following Friday. Children giving a negative result were then vaccinated. The vaccinated children are re-tested after nine weeks and the results noted. Any who fail to pass this test are re-vaccinated. The conversion rate of 98.8 per cent. is highly satisfactory. It will be noted from the above that a minimum of four visits to each school is required. Administrative difficulties are entailed as the vaccine is specially prepared in Denmark and flown to London weekly. As the Ministry of Health require at least three weeks notice for supplies it is not possible to alter dates of vaccination once they are made.

Difficulties have also been encountered with absentees. Some of the children have been absent on as many as six occasions which suggests unwillingness of the child to undergo vaccination, although the parents have given their consent.

The following statement gives details of the testing and vaccinations performed during the year.

Total number of children in age group	...	...	...	1194
Total number of children for whom consent to vaccination was received :				
Tested and found positive	...	...	...	215
Tested and found negative	...	...	...	483
Rejected because of eczema	...	...	...	2
Absent on all occasions	...	...	...	25
Absent during reading of tests	...	...	...	4
Left the district after first test and not read	...	...	...	1
				<hr/>
				730

Total vaccinations :						
Primary vaccinations	...	...	...	...	...	483
Re-vaccinations	...	...	...	...	...	3
						<hr/>
						486
Converted	...	...	...	...	...	477
Remaining negative at end of year	...	...	...	...	...	6
						<hr/>
						483

A notification of the results of the tests and vaccination is sent to the family doctor of each child by the Health Department.

Owing to the illness of a member of the teaching staff at one school, it was necessary to x-ray all children in contact with this teacher. This case, fortunately, occurred during the period when the Sheffield Area Mass X-ray Unit was in Rotherham and with the excellent co-operation of the teaching staff and of the Corporation Transport Department who provided buses, it was possible to x-ray every child in the school and all members of the teaching staff who voluntarily requested this examination. The process was carried through in a morning and afternoon session. No abnormalities were found amongst the teachers or the children.

SCHOOL MEALS SERVICE

ORGANISER OF SCHOOL MEALS : MISS N. TAYLOR.

The following summary gives the number of dinners, paid and free served during the year 1956. Although the price per meal was increased on the 1st September the number of meals served during the year shows a 3.9 per cent. increase.

Quarter	Children paid	Children free	Teachers paid	Teachers free	School helpers	Kitchen staff
Jan. — March	276,315	28,137	11,175	6,659	7,474	6,326
April — June	279,735	30,201	10,413	6,829	7,769	6,328
July — Sept.	187,632	19,432	7,530	4,611	5,368	4,545
Oct. — Dec.	294,782	28,903	12,588	6,422	7, 671	6,708
	1,038,464	106,673	41,706	24,521	28,282	23,907

Total number of meals supplied—1956—1,263,553

Total number of meals supplied—1955—1,215,617

The percentage of school children having dinners daily for one term :

1956	Average school attendance per day	Average number of meals per day	Percentage
September	14,241	6,369	41.2
October	14,236	6,348	41.2
November	14,083	6,375	41.4
December	14,021	6,346	41.2
Average	14,145	6,360	41.25

THE NUTRITIONAL STANDARD.

On the average the food required by a healthy child should be equivalent to 2,500—3,000 calories per day. The mid-day meal which is for many reasons the main meal of the day for nearly all children, should have an energy value of 1,000 calories. Moreover, most of the first class protein and much of the fat must normally be obtained from this meal. It is reckoned that an adequate school meal should contain 25 grammes of first class protein and 30 grammes of fat in all forms.

An analysis of a week's meals at the Thornhill School Kitchen, week commencing 1st October, shows that the standard is attained :

MONDAY

Hot Roast Beef, Cauliflower,
Creamed Potatoes, Gravy.
Currant Sponge and Custard Sauce.

TUESDAY

Fried Fish or Sausage, Green Peas,
Creamed Potatoes
(Sausage for St. Bede's)
Gooseberry Flan and Custard Sauce.

WEDNESDAY

Beef Steak Pie and Gravy,
Diced Carrots, Creamed Potatoes.
Baked Rice Pudding.

THURSDAY

Roast Lamb Cold, Cabbage,
Baked Potatoes.
Coconut Tart and Custard Sauce.

FRIDAY

Fried Sausage or Fish, Beans in Tomato Sauce, Creamed Potatoes.
(Fish for St. Bede's)
Steamed Date Pudding and Custard Sauce.

Ingredients					Total	Protein	Fat	Calories
Flour	..	..	..	..	148 lbs.	7,708	1,168	231,264
Margarine	..	..	..	..	56 lbs.	90	21,683	202,496
Lard	..	..	..	..	12 lbs.		5,395	50,304
Sugar	..	..	..	..	74 lbs.			132,608
Sago	..	..	..	..	14 lbs.	22	22	22,624
Meat	..	..	..	..	239 lbs.	17,136	20,256	249,760
Potatoes	..	..	..	..	15 cwt.	10,752		430,080
Cauliflower	..	..	..	..	10 st.	1,120		8,950
Marmite	..	..	..	..	6 ozs.	16.8		96
Milk	..	..	..	..	27½ galls.	3,960	4,840	83,600
Dried milk	..	..	..	..	125 lbs.	15,000	16,750	299,200
Custard powder	..	..	..	..	28 lbs.	44	90	44,800
Gooseberries	..	..	..	..	56 lbs.	179		16,128
Sausage	..	..	..	..	106 lbs.	5,616	6,246	103,456
Fish	..	..	..	..	119 lbs.	5,712	191	24,752
Peas	..	..	..	..	35 lbs.	3,920		57,600
Carrots	..	..	..	..	2 cwts.	716		21,504
Jam	..	..	..	..	56 lbs.	90		66,304
Cocoanut	..	..	..	..	14 lbs.	426	3,948	39,872
Eggs	..	..	..	..	10	68.4	70	920
Currants	..	..	..	..	10 lbs.	80		10,560
Butter beans	..	..	..	..	40 lbs.	1,080		16,000
					Total	73,736.2	80,659	2,112,878

Total No. of Dinners - 2,295	Protein - 32.1	} Per Meal
	Fat - 35.1	
	Calories - 920.8	

There is still much uphill work to be done by the School Meals Staff in this field of applied nutrition. I do not mean a basic study of nutrition or the theory of cooking and catering, but an application of nutritional knowledge to advance the health and general well-being by discovering the weak points in a common pattern of tastes and food habits and to help children to develop an appreciation of good food. The School Meals Service can do much to teach children social behaviour at the table and even in some cases to teach elementary mechanics of handling a knife and fork.

STAFFING.

In November the first domestic science trained cook-supervisor was appointed to take charge of the Oakwood Technical High School kitchen. This is our largest self-contained unit serving approximately 680 meals per day in four sittings.

NEW PROJECTS.

We had hoped to plan a kitchen dining hall at the Kimberworth Secondary Modern School this year. But this unfortunately had to be postponed.

PHYSICAL EDUCATION

ORGANISERS : MR. J. LONGSTAFF, M.A., MISS G. ELSWORTH.

(A) PHYSICAL TRAINING IN SCHOOLS.

Children in all schools receive instruction in physical training, playground games and activities. Where facilities permit, some movement training, dancing, field games and athletics are also included. Further additions have been made in the provision of some climbing apparatus, indoor or outdoor, in two old schools and the necessity for this type of apparatus in new schools is now established.

Some further locker accommodation for physical education clothing has been provided at Kimberworth Boys' School, and we look forward to a further expansion of this essential in the next few years.

(B) ORGANISED GAMES AND ATHLETICS.

Continued good use has been made of all playing areas in the Borough which are suitable and available to the schools. Many of the schools are still dependent on playgrounds only and the new schools often await the layout of playing fields for some considerable time after the school has been opened.

Frequent use is made of Herringthorpe Playing Fields, both during and out of school hours. Fields at Spurley Hey, Kimberworth and Park Street Schools are used to capacity and frequently over-played, though by using the South Street field, Kimberworth Boys' school can spare their own field.

Late in the year, work was begun on the levelling and laying out of Oakwood Technical High School (Girls) Field, together with the extended area for the Grammar School for Boys. Although this will create temporary problems, we look forward to the use of these properly constructed pitches in the future.

(C) SWIMMING.

Main Street Baths were used to capacity and limited use was made of Sheffield Road Baths in the summer. Whilst Primary Schools still receive first consideration in the allocation of time for instruction, this becomes more difficult with the opening of each new school as no additional swimming accommodation is being established in the Borough. As the numbers in the Secondary Schools steadily increase, the opportunity for swimming is naturally reduced and this has its repercussions on the numbers of awards gained.

Particular mention must be made of the R.L.S.S. awards gained by the boys of the Grammar School and Spurley Hey Secondary School, who have made excellent use of their additional out-of-school sessions.

Awards (1.9.55 to 31.7.56)	Boys	Girls	Total
Swimming certificates	826	603	1489
Royal Life Saving Society	628	248	876
Free passes	310	139	449
R.S.A.A. Award of Merit	—	2	2

(D) ADDITIONAL PREMISES.

(1) Brinsworth Street Gymnasium.

The College of Technology (Mining and Commerce Departments) and St. Bede's R.C. School (Senior Department) continue to make good use of this hall in the daytime, though the former are already looking ahead to the opportunities which the newly planned gymnasium will afford. In the evenings, badminton and physical training are held at the hall.

(2) Westgate Hall.

This Hall still provides the only indoor accommodation available at Alma Road (Girls') School and is well used for dancing and badminton in the evenings.

(3) Victoria Hall.

Both the Infant and Junior Departments of St. Bede's R.C. School make use of this hall which again affords their only indoor accommodation.

(4) Oakwood Technical High School Gymnasia.

Both these gymnasia have been used during the winter sessions for classes for women, girls and boys, and for training courses for teachers.

(E) COURSES.

Physical Training — The South Yorkshire Physical Education Association held two day courses, in June and November, on different aspects of physical training in the Junior School. Several teachers attended on each occasion.

Basic Movement — A four session practical course was held in April/May and was well attended, mainly by primary school teachers.

Cricket — The Indoor Cricket Coaching Scheme, under the direction of the two coaches, Mr. C. Lee (Derbyshire) and Mr. J. Hemsell, was continued for the two winter terms, 12 students attending each session.

Hockey — The official coach of the All England Women's Hockey Association, Miss G. Flew, conducted a three session course at the High School for Girls in September, which was attended by all women teachers in charge of Physical Education in Secondary Schools.

Swimming — An opportunity was taken in February to show film strips of the basic swimming strokes to primary school teachers in charge of swimming groups.

Outdoor Pursuits — By kind permission of the Derbyshire Education Committee, a number of places were reserved for a week-end course in April at The Derbyshire Outdoor Centre, near Buxton. Applications offered to teachers and youth leaders were unfortunately not fully taken up and the reservations had to be cancelled.

Dancing — In December, the trio of dancers of “Modern Dance Productions” gave two performances at the Oakwood Technical High School for Girls. Parties from sixteen Primary Schools attended in the afternoon and parties from eight Secondary Schools attended in the evening, together with other teachers who were interested.

(F) CAMPS AND SCHOOL JOURNEYS.

A wide range of interests has been explored at school camps and on journeys and visits.

During the Easter Holiday, a party from the High School for Girls visited the Field Studies Centre at Seahouses, whilst boys from the Grammar School Geographical Society undertook a walking tour in North Wales.

Other camps and visits arranged by various Secondary Schools for the Easter and Summer Holidays were of a more recreational nature and places visited included Kent, London, North Yorkshire, Derbyshire, Channel Islands, Paris, Switzerland.

Day journeys to many places of historical and geographical interest were undertaken by parties from Secondary and Primary Schools. Parties were also taken to see performances by the Sadlers Wells Theatre Ballet.

The Newman Special School arranged its first residential visit and was granted one of the few warm spells of the summer. A party of boys and girls was resident at the Ilam Youth Hostel, Derbyshire, for a week in July and benefited much from the change. A wide range of outdoor activities was undertaken.

(G) YOUTH COMMITTEE.

The usual programme of activities has been carried out including individual championships, league, or friendly matches in badminton, table tennis, football, athletics, cricket and rounders. Interest in some other activities has waned, making it impossible to enter teams in the Y.Y.O.S.A. Competitions.

Attendance at the special Youth Clubs' Swimming Session at Main Street Baths on Tuesdays has fluctuated somewhat, numbers increasing in the summer, but often being much reduced in the winter. Some members have gained awards of the Royal Life Saving Society. At the Y.Y.O.S.A. Swimming Gala, held in Huddersfield, the mixed team gained one 1st and three 2nd places and was placed sixth.

The uncertain weather probably accounted for the infrequent use of the Oakwood Tennis Courts. Although these were fully allocated, there were many occasions when only a few players made use of the facilities. The annual cricket and tennis matches against Doncaster were played in Doncaster this year and again their standard was too high for our teams.

The year ended on a better note, when the combined Youth Clubs' Badminton Team gained a well earned victory in an area Y.Y.O.S.A. competition against Halifax and Huddersfield and so passed forward to the inter-area final to be played in 1957.

(H) ROTHERHAM SCHOOLS' ATHLETIC ASSOCIATION.

Once again, excellent work in all branches of sport is reported, and the association expresses its appreciation of the support and help given by the Education Committee.

The usual competitions in football, athletics, cricket and swimming have been successfully completed, whilst the rallies in netball and rounders have again been enjoyed. It must be noted that the rugby section continues to make progress and that divisional honours have been gained for the first time.

Details of outstanding honours gained are as follows :

<i>Football</i>	County and England Cap : R. Collinson.
<i>Rugby</i>	Divisional Cap : S. Tompkin. Divisional Reserve : A. Cooper.
<i>Athletics. County honours</i>	Seniors : A. Fothergill, B. Richards. Juniors : J. Hewson, M. McCormick, C. A. Moss, T. Ratcliffe, D. Seymour.
<i>Cricket</i>	County Cap : J. Kay.

MINISTRY OF EDUCATION MEDICAL INSPECTION RETURNS

Year ended 31st December, 1956

TABLE I

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED
PRIMARY AND SECONDARY SCHOOLS

(A) PERIODIC MEDICAL INSPECTIONS.

Number of inspections in the prescribed groups :

Entrants	...	...	...	...	...	...	...	1497
Second age group	...	...	...	...	...	...	...	1436
Third age group	...	...	...	...	...	...	...	680
								—
							Total	3613
Number of other periodic inspections	...	...	...	...	...	...	...	1002
								—
							Grand total	4615
								—

(B) OTHER INSPECTIONS :

Number of special inspections	...	...	...	...	...	9857
Number of re-inspections	...	...	...	...	...	11007
						<hr/>
Total						20864
						<hr/>

(C) PUPILS FOUND TO REQUIRE TREATMENT :

NUMBER OF INDIVIDUAL PUPILS FOUND AT PERIODIC MEDICAL INSPECTION TO
REQUIRE TREATMENT (excluding dental diseases and infestation with vermin):

Group	For defective vision (excluding squint)	For any of the other conditions recorded in Table III	Total individual pupils
Entrants	12	105	115
Second age group	71	44	110
Third age group	26	15	40
Total (prescribed groups) ..	109	164	265
Other periodic inspections ..	66	126	181
Grand Total	175	290	446

D—CLASSIFICATION OF THE PHYSICAL CONDITIONS OF PUPILS INSPECTED DURING THE YEAR IN THE AGE GROUPS

Age groups	Number of pupils inspected	Satisfactory		Unsatisfactory	
		No.	Per cent.	No.	Per cent.
Entrants	1497	1481	98·93	16	1·07
Second age group ...	1436	1430	99·58	6	0·42
Third age group ...	680	678	99·71	2	0·29
Other periodic inspections	1002	984	98·20	18	1·80
Total	4615	4573	99·09	42	0·91

TABLE II.
INFESTATION WITH VERMIN

Total number of examinations in the school by the school nurses or other authorised persons	... ..	57,767
Total number of individual pupils found to be infested	... ..	329
Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	... ..	278
Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	... ..	51

TABLE III.

RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED
31ST DECEMBER, 1956.

A—PERIODIC INSPECTIONS.

Defect or disease	PERIODIC INSPECTIONS				TOTAL (including all other age groups inspected)	
	Entrants		Leavers		Requiring treatment	Requiring observation
	Requiring treatment	Requiring observation	Requiring treatment	Requiring observation		
Skin	2	38	3	17	34	146
Eyes—Vision	12	50	26	122	175	624
Squint	6	31	1	2	8	59
Other	2	5	2	—	9	12
Ears—Hearing	4	16	—	1	9	30
Otitis media ..	6	30	1	10	18	72
Other	—	4	—	—	2	11
Nose and throat ..	56	311	2	14	96	506
Speech	12	20	—	—	18	58
Lymphatic glands ..	18	176	—	1	22	244
Heart	1	17	—	6	1	64
Lungs	3	92	—	7	4	140
Developmental—						
Hernia	2	7	—	—	2	10
Other	1	32	—	2	4	81
Orthopaedic—						
Posture	2	3	—	1	14	40
Feet	1	34	—	5	27	108
Other	4	24	1	6	18	103
Nervous system—						
Epilepsy	2	8	—	1	8	28
Other	1	21	—	—	4	74
Psychological—						
Development ..	—	2	—	—	1	13
Stability	—	6	—	—	—	15
Abdomen	—	5	—	2	2	12
Other	8	43	3	16	31	153

B—SPECIAL INSPECTIONS.

Defect or Disease	SPECIAL INSPECTIONS	
	Requiring treatment	Requiring observation
Skin	2056	91
Eyes—Vision	336	657
Squint	15	83
Other	370	30
Ears—Hearing	153	45
Otitis media... ..	34	14
Other	250	57
Nose and throat	635	668
Speech	142	59
Lymphatic glands	16	183
Heart	1	41
Lungs	5	189
Developmental—		
Hernia	1	23
Other	1	49
Orthopaedic—		
Posture	—	8
Feet	14	53
Other	24	110
Nervous system—		
Epilepsy	—	22
Other	1	165
Psychological—		
Development	4	22
Stability	3	11
Abdomen	5	57
Other	2533	707

TABLE IV

TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS
(including Special Schools).

GROUP 1.—EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases dealt with	
	by the Authority	otherwise
External and other, excluding errors of refraction and squint ..	363	12
Errors of refraction (including squint)	—	854
Total	363	866
Number of pupils for whom spectacles were :		
Prescribed	—	766

GROUP 2.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases treated	
	by the Authority	otherwise
Received operative treatment :		
(a) for diseases of the ear	—	2
(b) for adenoids and chronic tonsilitis	—	177
(c) for other nose and throat conditions	—	51
Received other forms of treatment	613	69
Total	613	299
Total number of pupils in schools who are known to have been provided with hearing aids—		
(a) in 1956	—	3
(b) in previous years	—	—

GROUP 3.—ORTHOPAEDIC AND POSTURAL DEFECTS

	by the Authority	otherwise
Number of children known to have been treated at clinics or out-patient departments	—	102

GROUP 4—DISEASES OF THE SKIN (excluding uncleanliness, for which see Table II)

	Number of cases treated or under treatment during the year by the Authority
Ringworm : (1) Scalp	1
(2) Body	4
Scabies	2
Impetigo	71
Other skin diseases	1920
Total	1998

GROUP 5.—CHILD GUIDANCE TREATMENT

Number of pupils treated at child guidance clinics under arrangements made by the Authority	63
--	----

GROUP 6.—SPEECH THERAPY

Number of pupils treated by speech therapist under arrangements made by the Authority	130
--	-----

GROUP 7.—OTHER TREATMENT GIVEN

Number of cases of miscellaneous minor ailments treated by the Authority	2259
Pupils who received convalescent treatment under School Health Service arrangements	154
Pupils who received B.C.G. vaccination.. .. .	486
Other treatments :	
Enlarged glands	8
Rheumatism	3
Foot conditions	108
General condition	3
Coryza	9
Total	3030

122

TABLE V

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY
THE AUTHORITY

Number of pupils inspected by the Authority's dental officers :

Periodic inspections	...	...	...	...	...	...	9354
Specials	...	...	...	...	...	...	1364
							<hr/>
Total							10718 <hr/>
Number found to require treatment	...	...	...	...	...	...	8917
Number offered treatment	...	...	...	...	...	...	8029
Number actually treated	...	...	...	...	...	...	4792
Attendances made by pupils for treatment	...	...	...	...	...	...	12009
Half-days devoted to inspection	...	...	...	...	...	...	90
treatment	...	...	...	...	...	...	1630
							<hr/>
Total							1720 <hr/>
Fillings :	Permanent teeth	...	...	...	...	...	3505
	Temporary teeth	...	...	...	...	...	85
							<hr/>
Total							3590 <hr/>
Number of teeth filled :	Permanent teeth	...	...	...	...	...	2912
	Temporary teeth	...	...	...	...	...	79
							<hr/>
Total							2991 <hr/>
Extractions :	Permanent teeth	...	...	...	...	...	2928
	Temporary teeth	...	...	...	...	...	7568
							<hr/>
Total							10496 <hr/>
Administration of general anaesthetics for extraction					...	...	4462

Orthodontics :

(a) Cases commenced during the year	...	...	...	341
(b) Cases carried forward from previous year	...	...	...	94
(c) Cases completed during the year	...	...	...	115
(d) Cases discontinued during the year	...	...	...	103
(e) Pupils treated with appliances	...	...	...	363
(f) Removable appliances fitted	...	...	...	366
(g) Fixed appliances fitted	...	...	...	49
(h) Total attendances	...	...	...	2703

Number of pupils supplied with artificial dentures ... 95

Other operations :

Permanent teeth	...	...	...	...	...	2129
Temporary teeth	...	...	...	...	...	297
						<hr/>
Total						2426
						<hr/>